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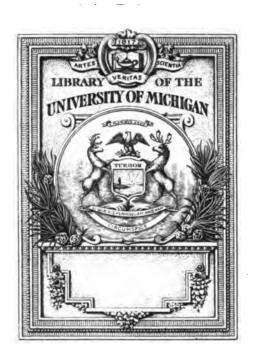
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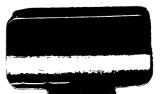
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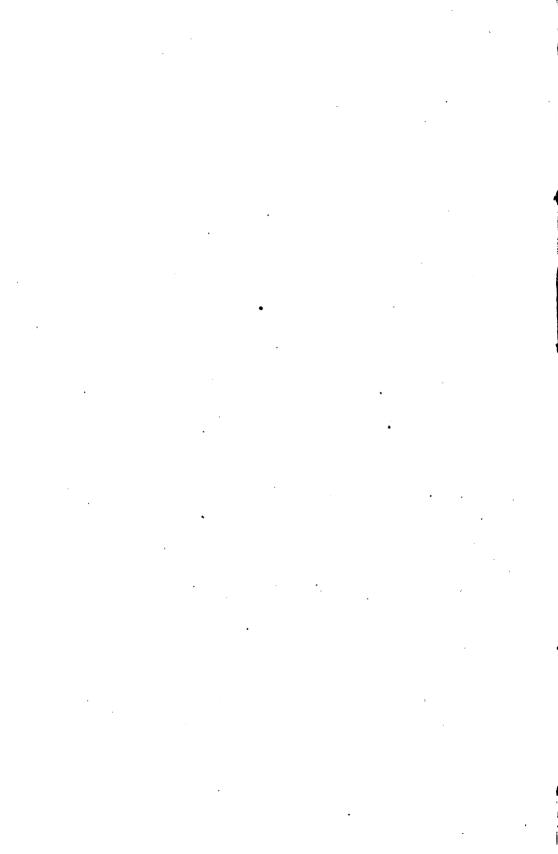
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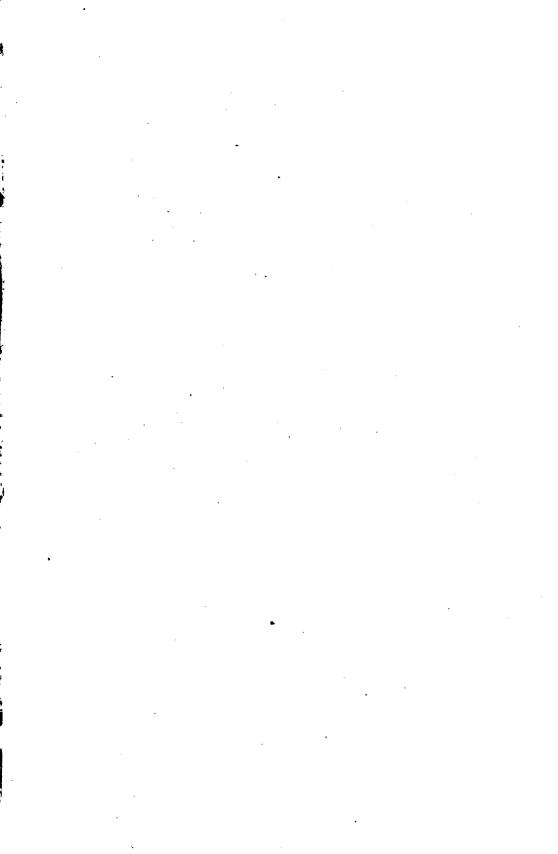


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### DEPARTMENT OF PUBLIC SAFETY

# Annual Report

# Sub-Department of Health



To the Mayor and City Council of Baltimore for the Fiscal Year Ended December 31, 1914

BALTIMORE
MEYER & THALHEIMER
CITY PRINTER

1915

Dup. 1920 D. of D. MAY 8 1919

# ANNUAL REPORT SUB-DEPARTMENT OF HEALTH

### Report of the Commissioner of Health.

BALTIMORE, July, 1915.

To the Mayor and City Council of Baltimore.

### DEAR SIRS:

I beg leave to submit the following statement concerning the work of the Sub-Department of Health for the year ending December 31, 1914.

The mid-year population, estimated in accordance with rules of United States Census Bureau, is 579,593.

I am much pleased to be able to say that the death rate, 18.20 per 1,000, not only is lower than that of the year 1913, but also the lowest that has been recorded since the beginning of vital statistic work in 1875. The following table shows a decline from 24.36 to 18.20 per 1,000 people living, or a gain of 6.16 per 1,000, which seems to be a permanent gain, inasmuch as the death rate has reached 19 per 1,000 only once since the year 1907:

Death Rates Revised According to United States Census Returns, and Intercensal Yearly Increase.

YEAR.	Total.	White.	Colored
875	24.36	22.87	32.63
876		22.08	34.64
877		26.31	41.06
878	21.05	19.41	30.86
879		21.11	33.09
880		22.11	34.76
881	25.67	22.32	37.99
882		23.16	36.16
883	25.78	23.29	38.91
884		20.01	31.97
885		19.20	30.17
886		19.48	30.04
887		18.60	31.45
888		19.69	31.56
889		18.00	28.52
890		21.00	31.61
891		20.94	32.56
892		22.00	31.78
893		10.08	30.70
804		18.45	31.00
895		19.77	32.83
896	20.67	18.80	30.81
897		17.42	28.46
898		18.97	31.80
899		18.33	30.37
900		18.84	32.65
901		18.10	32.64
902		17.63	31.14
903	19.34	17.20	30.48
904	20.43	18.00	33.21
905	20.01	17.57	33.40
906	19.93	17.60	32.75
907	20.55	18.18	33.64
908	18.99	16.92	30.44
909		16.58	30.53
910		17.17	30.60
911	18.43	16.21	30.85
912	18.33	16.25	30.00
913		16.26	31.64
914	18.20	16.08	30.18

This means that had the same rate continued as in the beginning there would have died in our city 14,121 people, in-

stead of 10,551, which was the actual number this year—a saving of 3,570 lives. This saving has been more marked amongst the white people than amongst the colored, which is also shown in the table.

There has not been a sufficiently exhaustive study of all of these annual death rates to justify anyone in asserting that this saving of life has been mostly due to any one cause, but a cursory glance at some tables points out clearly that the saving has been very marked during child life.

If we divide the forty years, 1875-1914, inclusive, into eight five-year periods, we find that scarlet fever deaths are as follows:

Five-Year Periods.	Average No. of Deaths per Year.	Average Yearly Population.	Death Rate per 100,000.	
1875-79	407	313,366	129.9	
1880-84	246	353,525	<b>69.</b> 6	
1885-89	50	404,651	12.1	
1890-94	110	450,008	24.4	
1895-99	43	487,222	8.8	
1900-04		519,443	11.4	
1905-09	38	544,281	7.0	
1910-14	59 38 38	569,541	6.7	

This is again shown in the history of diphtheria:

Five-Year Periods.	Average No. of Deaths per Year.	Aver <b>age</b> Yearly Population.	Death Rate per 100,000.	
1875-79	396	313,366	126.4	
1880-84	710	353,525	200.8	
1885-89	289	404,651	71.4	
1890-94	316	450,008	70.4	
1895-99	338	487,222	68.8	
1900-04	171	519,443	33.0	
1905-09	87	544,281	16.0	
1910-14	<b>7</b> 9	569,541	13.9	

It seems to us that a still further reduction, of a permanent character, in these two diseases could be brought about by increasing the capacity of Sydenham Hospital to a degree that will actually be protective to the children.

One more illustration is found in the number of deaths of infants under one year of age. These deaths have been considered (after the first three months) to be mostly due to the diseases of the alimentary canal (digestive tract), and that the most common source is found in the food of the infant, which at that age (under one year) is milk.

The death rate under one year of age per 10,000 of population for each semi-decade is as follows:

1875-79 77.2	1895-99	53.1
1880-84 65.6	1900-04	
1885-89 60.3	1905-09	43.I
1890-94	IQIO-14	31.9

The proportion of deaths of children at this age will undoubtedly be reduced as we improve the milk supply, especially by having all milk pasteurized before delivery to the consumer. When this is brought about (or even before), pasteurized milk should be provided for the poor.

### WATER FILTRATION

The sanitary work that is now under way in the construction of the water filtration plant and the sanitary sewerage system will still further assist in the reduction of the death rate, although we do not expect this to be suddenly evidenced by a sharp decline, but that it will be distributed over a number of years. We expect the water filter to remove all the water-borne typhoid fever, which has been up to this time controlled and reduced by the alum and hypochlorite of lime treatment. This was commenced in June, 1911. It has been noticed in other cities that the filtration plants demonstrated

their value not only in the reduction of typhoid fever, but also in other water-borne diseases, such as dysentery, etc. We, of course, expect this to occur in Baltimore.

### SANITARY SEWERAGE SYSTEM.

The rapid development of the sanitary sewerage system is removing physical conditions that are directly and indirectly detrimental to health, but it is practically impossible to determine its exact value. It presents possibilities in the improvement of the home environment that must ultimately produce a further permanent decrease in our death rate. (See report of Plumbing Division.)

### MEDICAL INSPECTION OF SCHOOLS.

This very important work was begun in 1905 and equipped to its present force of five physicians and five nurses in 1906. The past school year, October, 1913, to June, 1914, has been no exception in the excellent work that has been done by both physicians and nurses. The following tabulated statement shows not only the amount of work done, but also some of the work not done, because of the disproportion in the number of workers to the number of children examined. All children in the parochial schools have been examined each year, but only the first four grades in the public schools. The following table has been constructed according to the reports of the year 1913-14:

	Public	Parochial
	Schools.	Schools.
Children enrolled	. 40,788	11,875
Children examined	. 38,028	10,594
Children defective	. 12,495	2,324

Each child found defective showed one or more defects, some of which were incurable, but the great majority were amenable to treatment. A review of results of the year's

work shows in the three classes or divisions, "cured," "improved," "unimproved":

	Cured.	Imp'd.	Unimp'd.
Public schools (white)	3,956	2,309	6,318
Public schools (colored)	<b>273</b>	198	979
Parochial schools	834	. 335	1,472

The very large number of "unimproved" is due chiefly to the need of nurses to do "follow up" work, which requires visits to homes, individual treatment and visits to dispensaries. This work by the nurses outside of the school buildings necessarily takes much time, as visits are frequently made to homes that are separated by considerable distances.

It seems to us that a very great deal of good could be accomplished by the city establishing "clinics," either in school buildings or at convenient points, to which children could be taken to have their teeth, throats, noses and eyes more carefully examined than is possible in routine school examination and where proper treatment could be given. This is suggested because amongst the poor is experienced the difficulty of overcoming distances to the established dispensaries and the undesirable commingling with adults within dispensary rooms.

It would make our work better in every way to have someone in the field in control of all the work. This would be of advantage because the work in the different groups of schools could be standardized, which probably would lead to the determination of factors in the production of physical defects in children.

### HEALTH WARDENS.

There has been so much said regarding the health wardens by those who must find fault, and by those not thoroughly informed, that I venture to present one or two facts concerning them.

I imagine that if every effort were made to provide one type and one calibre of physicians to fill the places of health wardens the result would be a marked difference in ability and temperament, thus producing a considerable range in efficiency. However, the variety of work they are called upon to do and the differences in the amounts of work and territory they are required to cover would produce this or similar results, even though all the physicians measured up to the same scale. The present system prevents the establishing of a fair standard of efficiency as a guide.

I shall call your attention at this time to but one duty of the health wardens that should be changed, namely, sanitary inspection work. We believe that a more efficient arrangement would be to put all this work under a Bureau of Plumbing and Sanitation, with one chief and two assistants. Each of the latter would have in charge the field men—one set of men to look after new plumbing work, the other to look after repairs and nuisances of all kinds. The idea is to specialize the work so that physicians would look to the prevention of disease and plumbers would abate nuisances.

### POLICE PATROLMEN.

We are now looking to the development of the idea of making the police patrolmen actual factors in sanitary work. As you know, they have always been of assistance to the Sub-Department of Health, but the individual officers were not made responsible for the cleanliness of their posts. During this year the Board of Police Commissioners issued an order to the patrolmen that they should give their personal attention to the unsanitary conditions due to carelessness of tenants and get immediate results, rather than through the roundabout, inefficient way heretofore followed. Naturally, it will take some time for this plan to be perfected; but when it has, both time and money will be saved and efficiency promoted.

### SYDENHAM.

This hospital for so-called minor infectious or communicable diseases was opened to the public with a capacity for thirty-six patients, for white children only, suffering with scarlet fever or diphtheria. It is calculated that at least three hundred beds will be necessary to meet the demand, if the intention of making the hospital a protection to children is carried out.

The superintendent points out that the total number of children treated this year falls below that of last year (1913) because "in the early part of the year we had an outbreak of diphtheria among the nurses, and it was impossible for us at that time to obtain nurses to substitute for the ill members of our staff."

In the latter part of the year many cases of scarlet fever were refused admission because the wards were already crowded with patients.

The building to be used as the superintendent's residence was finished (but not furnished) in December, 1913, and was occupied by the resident physician and assistant in March, 1914. Part of the building was converted into an administration office.

A very much needed building, to be known as the "Observation Ward," or Ward B, has been almost completed. On January 5, 1915, it was turned over to the Commissioner of Health, who had to use the building in its incomplete condition to meet the scarlet fever situation. This building will be of great value to Sydenham in many ways, but especially in lessening the possibility of cross-infection, which frequently puts a hospital ward temporarily out of commission.

Setting aside the city's need of a larger hospital, it is necessary for me to mention the following requirements in provid-

ing accommodations and facilities in the management of what is now in commission:

- 1. Enlarged and well-equipped nurses' home.
- 2. Observation ward (Ward B) to be furnished, screened, painted and properly equipped.
  - 3. Superintendent's building furnished and equipped.
- 4. Administration office building with quarters for assistant resident physician.
  - 5. Erection of a morgue and chapel.
  - 6. Incineration and fumigation plant.

### QUARANTINE.

After the commencement of the European war in the first week of last August, it looked as though the usual revenue would be greatly reduced. In that month our receipts from inspection fees, dropped about five hundred dollars; but much to our surprise and gratification, the subsequent months showed a marked revival, which brought the year to within thirteen hundred dollars of the receipts of last year. The total receipts from all sources in 1914 were \$18,512.97, \$3,837.03 less than the appropriation for management and maintenance.

During the first part of the year the accommodations for the treatment and care of patients were greatly overtaxed by the large number of citizens who were taken to Quarantine suffering with smallpox. At one time the number of patients was so large that the building constructed for the unvaccinated contacts, or suspects, had to be turned over to white people with smallpox, and the old hospital building used for colored people only. Even then the latter building was overcrowded. If the outbreak of the disease had not at this time reached its climax we should have been compelled to hang out yellow flags within the city, which has not been necessary since 1883.

The growth of our city and its greater importance in trade increase the floating population, both white and colored, which

results in a greater number of people unvaccinated or susceptible to smallpox. We therefore think it wise to urge upon you the necessity for greater accommodations at Quarantine, especially a pavilion hospital building for white people, and the retention of the present structure for colored people only.

### BUBONIC PLAGUE.

The subject of Quarantine naturally leads to the consideration of bubonic plague, because it is most commonly conveyed from port to port through the agency of rats on ships. Owing to the gradual spread of this disease into many ports it has been considered wise that all ports, especially those of large shipping interests, should make special efforts through their health officers to acquaint themselves with the condition of rodents, especially about the wharves, so that the earlier appearance of the plague may not be missed, and also to carry out methods of building out (rat-proofing) and of eliminating this source of danger to our commerce. We urge this upon your attention as a wise precaution, even though no infected rat be found.

### BUREAU OF FOOD AND DAIRY INSPECTION.

There are now six dairy farm inspectors, an increase of three over last year.

		No. of Inspections.
1913		•
1914	1,458	3,820

The above table shows the increased amount of work done. One hundred and sixty of the above farms received two hundred and thirty-one special investigations, which were made because of the high bacterial count of the milk. These special investigations resulted in the disappearance of the trouble from one hundred and forty-one farms, the stopping of shipment

of milk from four farms, and the elimination of milk from one hundred and fifty-six cows from the shipments to Baltimore.

The sanitary conditions of the farms have been greatly improved in many places, also the methods of handling milk. This work has resulted in lessening the amount of milk condemned after its arrival in the city, as compared with that in former years.

We believe that our dairy supervision could be greatly improved by requiring the license of each dairy to be renewed every year and a charge made for the same, which would pay for the necessary force to carry out the work thoroughly.

An effort should be made to remove all slaughter houses that are not equipped with the most modern conveniences for the slaughtering of animals, the protection and preservation of meats, the prevention of foul odors and unsanitary conditions surrounding the places of slaughter.

Another very closely related subject is worthy of careful consideration, namely, the slaughtering of chickens. There are many places where chickens are slaughtered in large numbers, which should be especially supervised. This would be made much simpler and less expensive if special slaughter houses were provided, and so constructed that unsanitary conditions would be improbable.

### TUBERCULOSIS NURSES.

This division of our force working against preventable disease has been grappling with an ever-increasing amount of work without a proportionate increase in the number of nurses, which has resulted in each nurse having to look after more than two hundred patients. The following table presents some of the work done by the nurses and at the three dispensaries for tuberculosis cases:

Total number of cases	3,657
Average number of cases per nurse	228.5
Number of patients sent to sanitarium	851
Preliminary reports for fumigation after death	1,110
Preliminary reports for fumigation after removal	2,264
Number of houses fumigated and cleansed	821/2%

The three tuberculosis dispensaries are taxed to their capacity.

Total amount of work done in the three tuberculosis dispensaries during 1914:

Positive cases	789 223 289 277
Total	<b>78</b> 9
White patients	713 76
Total	789
Sent by— .	
Tuberculosis nurses	330
Other nurses	44
Federated Charities	129
Friends	138
Other dispensaries	83
Other physicians	54
Came of own accord	11
Total	789
Old patients returned	
Prescriptions given	550
Advised sanitarium	161
Entered sanitarium	66
Advised other clinics	125

It has become more and more evident that lessening and eliminating this disease from our people present a problem of great proportions, and one that will involve great expense. It is also equally evident that the disease can be lessened or eliminated by the same means that have been employed elsewhere. A fundamental part of such work is the segregation of advanced cases. If this is done amongst the poor people who need the city's aid, we accomplish not only the removal

of distributing foci of the disease from amongst highly susceptible people, but a burden from the working members of a family, which relief will increase their warge-earning capacity. This will make it possible to protect the remainder of the family, as the workers will be able to supply more and better food.

A hospital which would accommodate five hundred patients within a short distance of the centre of the city would be a strong factor in the successful fight against this disease.

### COMMUNICABLE DISEASES

The following table shows the number of cases of each disease reported during the year, as compared with the report of 1913:

	1913.	1914.
Smallpox	50	325
Diphtheria	1,309	1,203
Scarlet fever	1,138	802
Typhoid fever	1,163	757
Measles	5,724	466
Mumps	161	602
Whooping cough	290	522
Varicella	595	788
Tuberculosis (pulmonary)	1,541	1,410
Poliomyelitis (infantile paralysis)	2	1
Epidemic cerebro-spinal meningitis		3

The supervision of these diseases constitutes one of the most important divisions of our work and should be under the charge of a trained man who could devote his whole time to this work only in all its phases, so that there would be uniformity in the detail work and as little loss of motion as possible. We believe that we could expect a permanent reduction in the number of cases under such management.

While every one of the diseases enumerated above presents features of special interest, the number of typhoid fever cases is of more general interest on account of the construction of the filtration plant (soon to be put into commission) and the present treatment of the water. Therefore, it will be of interest to study the following table:

Year.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
1909 1910 1911 1912 1913	39 40 55 47 53 19	23 25 31 28 40 12	20 30 35 33 38 13	22 22 44 37 17	23 31 56 30 31 31	41 46 34 57 51 45	107 110 89 98 148 70	217 473 280 198 314 134	312 398 241 212 233 130	138 359 170 190 129 132	61 251 104 77 65 97	66 106 62 76 44 64	1,069 1,891 1,201 1,083 1,163 757

This shows that the year 1914 produced the lowest number of cases of this fever for the past six years. Indeed, we can go much farther and say that it is the lowest number since the year 1899.

We finally desire to record our appreciation of the great improvement in our working quarters by the transference of the Department from the old location in the school building of Zion Church on Gay street to the specially reconstructed building of the old Polytechnic School on Courtland street. We believe that our laboratory equipment is second to none, and the greatly improved environment of all our divisions has been appreciated by all and we are convinced has increased every employee's interest in his work.

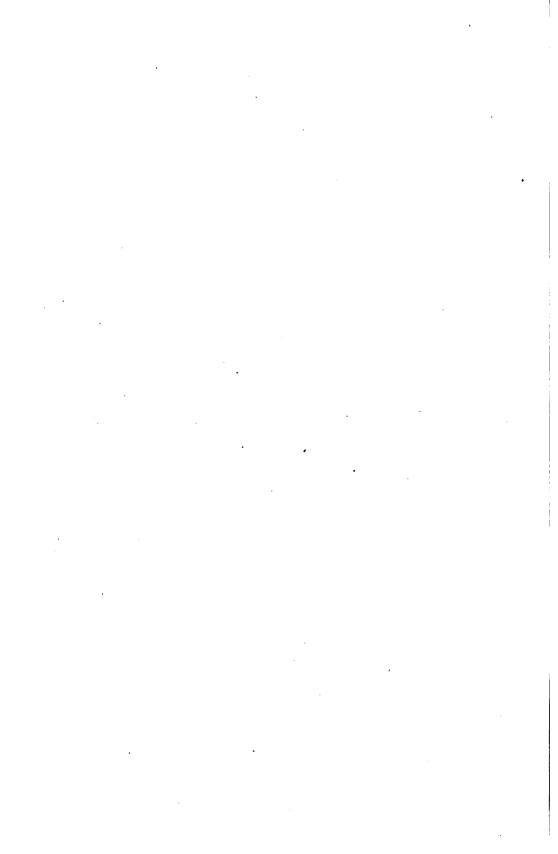
Yours respectfully,

NATHAN R. GORTER, M. D., Commissioner of Health.

# ANNUAL REPORT

OF THE

# ASSISTANT COMMISSIONER OF HEALTH



### Report of the Assistant Commissioner of Health.

BALTIMORE, July 1, 1915.

Dr. Nathan R. Gorter,

Commissioner of Health.

### DEAR DOCTOR:

I hereby respectfully submit to you the report of the Sub-Department of Health for the year 1914.

I deem it altogether superfluous for me to call your attention to the recommendations that are set forth clearly in the reports of the several active divisions, which have been made as a result of the experience of the workers during the year and which have been referred to in your report to the Mayor and City Council. There is one, however, which I have had more directly under my charge, to which I call your attention, i. e., smallpox.

You probably recall that on November 11, 1912, a case of smallpox was discovered on North Carey street, which came to Baltimore city on November 4, before the appearance of an eruption. When this patient was found he had at least a four-day eruption, and consequently was the starting focus of a small outbreak of smallpox which produced four cases in November, eleven in December, of 1912; and in 1913, twenty-seven cases in January, thirteen in February and one in March. All of these could be traced directly or indirectly to the original case on November 11, 1912. Later in the year 1913 there were two cases in May, one in June and two in July, which I could not trace to the cases above referred to and were apparently fresh imports. Likewise, the same history is for

September, when there were three cases. On the twenty-fourth of December, 1913, there was another case reported, about which I will refer later.

All of the cases above referred to were almost altogether confined to the region at the junction of the Fourteenth, Fifteenth and Sixteenth Wards, amongst the colored poulation. There were about eight cases that were scattered about the city, which developed in the latter part of the outbreak, by which time the special work of the health wardens and extra vaccine physicians was producing its effect. The work of the vaccine physicians was confined as much as possible to the people who had never been vaccinated.

The case on December 24, reported by Dr. Wade and referred to above, was the beginning of another outbreak, which had quite a different history from the outbreak beginning in 1912. This case was in a man living on South Bethel street, who had been recently released from jail. Upon inquiry I found that he was discharged on December 1, and when we found him he had a three-day eruption, so he must have met with a case of smallpox almost immediately after his exit from the jail; but no information could be extracted from him that could lead to the discovery of other cases, although search was made the latter part of December and the first part of January.

On January 10 another case of smallpox was discovered which I could not trace to any other, but about January 25 a young negro came into the Health Department, and upon examination I found him to be suffering with smallpox. He informed me that if he had the smallpox then there were others in the place he came from. We obtained from him the information that the place he had been stopping was 212 Marsh Market Space. There we found other cases of active smallpox, and three that were well of the disease and apparently had suffered with smallpox in the early part of Decem-

ber, but they had not been discovered because they kept close to quarters. On finding this nest of smallpox we believed that we found the origin of the case of December 24. The lateness of the finding, however, convinced us that in all probability we would have trouble, and the record of the year clearly shows the most stubborn fight against smallpox we have had since 1882 and 1883, and we cannot help but believe that the large amount of vaccination that was done during the winter of 1912-1913 was greatly responsible for the prevention of an epidemic in the first part of 1914. We find that the cases developed by months as follows: January, 20: February, 82; March, 143; April, 44; May, 15; June, 11; July, 1; August, none; September, none; October, none; November, none; December, none. A comparison of the maps showing the outbreaks of 1912 and 1913 and that of 1914 shows that in the latter year the cases were scattered all over town, while in the former they were practically confined to a comparatively small area. We believe that this was principally due to the fact that the focus in 1912 was found early, while the focus in 1914 was found later, when other foci had already been developed.

My reason for giving the above hurried account of the two years is:

First—To call attention particularly to the month of March, when we had 143 cases, which, added to those who were already in the hospital from February, taxed our capacity to the utmost, and, indeed, to such a degree that the detention house had to be converted into a hospital.

Second—Our city is growing rapidly; the floating population increasing, which increases the number of unvaccinated people, thus presenting a fertile field for smallpox to develop when once introduced. In all probability, therefore, we will have from time to time outbreaks that while they do not amount to epidemics yet they do, or will, tax our capacity for caring for them at Quarantine; then it will be incumbent upon us to

use the houses within the city as hospitals and put out yellow flags. This is a condition to be avoided at all hazards. It can be done, in my judgment, by increasing the capacity of the accommodations at our Quarantine Station, and it has been suggested by the Quarantine officer (Dr. Richardson) that we convert the present hospital into one for colored people and build another pavilion for white people. This should be done as soon as is practicable.

Yours respectfully,

C. Hampson Jones,
Assistant Commissioner of Health.

# **TABLES**

### Medical Examination of

## Public and Parochial Schools

### MEDICAL INSPECTION OF SCHOOLS.

The following shows the tabulated work done by the medical inspectors and the nurses. The recommendations given by the physicians and nurses remain the same as of last year.

The fundamental idea seems to be that the further development of the school work depends upon the increase of nurses two or threefold.

MEDICAL EXAMINATION OF PUBLIC SCHOOLS.

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TABLE No. 1—Showing Total Defects of		Defects.	Ear— Deafness Otitis media Otorrhæa	e— 3Iepharitis Oniunctivitis	3ye strain. Dpacity Strabismus	Keratitis. Scalp— Alopecia. Pediculosis	Ringworm  nuth— Leeth (defective)	Jongue-tie  Nose— Adenoids  Rhinitis
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13 13	. 72	31	0	306 298 93 1
Nervous System— Epilepsy Chorea Mental deficiency Paralysis (infantile)	Exema Impetigo Ringworm Scabies	Thatyngitis. Tonsils (enlarged)	Adentits Enuresis T. B. of spine T. B. of joints T. B. of lungs. Deformities (rachitic) Deformities (spine) Malnutrition	No. of children enrolled.  No. of children examined.  No. of children defective.  No. of children excluded.  No. of children ordered vaccinated

MEDICAL EXAMINATION OF PUBLIC SCHOOLS.

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School 11.	7 :	23 : : :		91	20.
Defects.	Ear— Deafness Ottits media Otorrhœa Eye— Blepharitis Conjunctivitis	Eye strain Opacity Strabismus Stye Tarsal tumor Blind in one eye. Tear duct obstructed	Alopecia Pediculosis Ringworm Seborrhea	Teth (defective) Tongue-tie Cleft palate Pyorrhæa alveolar	Nose— Adenoids Rhinitis Deformities
	School 115 School 125 School 306 School 118 School 106 School 106 School 118 School 106 School 118 School 106 School 106 School 106 School 118 School 106 School 118 School 106 School 118	School 15.   School 16.   School 17.   School 18.   School 19.   School 59.   School 59.   School 65.   School 10.   Sch	School 15.   School 15.   School 16.   School 19.   School 19.   School 19.   School 19.   School 30.   School 30.   School 30.   School 30.   School 50.   School 50.   School 65.   Sch	School 15    School 16    Sch	Calibool   Calibool

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	<u> </u>		7	<u> </u>
Nervous System— Epilepsy Chorea Mental deficiency Paralysis (infantile) Speech imperfect Habit spasm Hemiplegia	Acne Eczema Impetigo Ringworm Scabies Ichthyosis	Pharyngitis Tonsils (enlarged) Tonsilitis	Adenitis Enuresis T. B. of spine T. B. of joints Deformities (rachitic). Malnutrition Anæmia Nervous Diphtheria Hare-lip	No. of children enrolled No. of children defective No. of children excluded No. of children excluded No. of children ordered vaccinated

\*Incomplete.

# MEDICAL EXAMINATION OF PUBLIC SCHOOLS.

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Table No. 3—Showing Total	School 3.	. 8.8.	6 : 2	: 00	40 : :	23	31	. H
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	DEFECTS.	Ear— Deafness Otitis media Otorrhœa Cerumen	Blepharitis Conjunctivitis Eye strain.	Opacity Strabismus Stye Ptosis	Pediculosis Seborrhæa Porrigo	Mouth— Teeth (defective)	Adenoids Adenoids Rhinitis Deformities	Nervous System— Chorea  Mental deficiency  Paralysis (infr'le)  Paralysis (facial)  Defective speech

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Skin— Acne Ecthyma Eczema Impetigo Ringworm Scabies Ichthyosis	Tonsils (enlarged).	A Scenario Constitution of Con	amined	fective	cluded	dered vaccinated

MEDICAL EXAMINATION OF PUBLIC SCHOOLS.

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School 13.					<u> </u>	55	9	73
Defects.	Jar— Deafness Otorrhœa	Blepharitis Blindness (one eve)	Conjunctivitis Eye strain	StrabismusStye	Ptosis Nystagmus	Pediculosis Ringworm	Teeth (defective)	Nose— Adenoids Rhinitis
	School 115. School 85. School 85. School 87. School 87. School 57.	School 35.   School 35.   School 35.   School 55.   School 57.   School 57.   School 57.   School 57.   School 56.   School 57.   Sch	2   School 33.   School 35.   School 35.   School 51.   School 52.   School 54.   School 54.   School 54.   School 55.   School 55.   School 55.   School 57.   School 56.   School 57.   S	2	School 35.  2	School 35	25. School 37. School 38. School 38. School 36. School 36. School 36. School 36. School 37. School 36. School	Et lood S  Et lood S

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Nervous System— Epilepsy			Adentis T. B. of spine. T. B. of spine. Filth Malnutrition Varicella Laryngitis Limp Wry neck.	No. of children enrolled No. of children examined No. of children defective No. of children excluded No. of children ordered va

MEDICAL EXAMINATION OF PUBLIC SCHOOLS.

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z Total	School	: 0	:	: :4"	: :	52 :	: 8	::	32	: : 0
Table No. 5—Showing	Derects.	Ear— Deafness	Eye— Blepharitis	Conjunctivitis  Eye strain Strabismus	Opacity Stye	Scalp— Pediculosis Ringworm	Seborrhæa	Cleft palate Alveolar abscess	Nose— Adenoids Nervous System—	Epilepsy

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Acne Eczema Impetigo Ringworm Scabies Theory	Tonsils (enlarged).	T. B. of spine T. B. of joints T. B. of joints T. B. of joints	chitic)	No. of children en- rolled	amined	fective	cludedNo of children or	dered vaccinated

TABLE No. 6—Showing Total Defects of Children in Each School Examined by Dr. H. Warren Buckler and Mrs. Olivia C. Dawson.

Fourteen Holy Martyrs. St. Joseph's. St. Mary's. Our Lady of Good Counsel. Holy Cross. St. Jerome's.	St. John the Baptist.	Total.
Ear— Deafness		12 4
Blepharitis.	 3  2	37 3 107 7 21 1
Pediculosis		34
Teeth (defective) 46 17 76 62 34 56 79	4	374
Nose—       36       13       59       23       32       34       61         Rhinitis	5	263 79
Epilepsy       I         Chorea       I         Mental deficiency       I         Paralysis (infantile)       3         9       1         3       3         3       3         3       3	I	1 6 21 3
Skin—         Acne.       I         Impetigo.       I         Ringworm.       I         Throat—       I	• • • •	5 3
Tonsils (enlarged) 23 11 40 21 15 27 40 Miscellaneous—	I	178
Adenitis       I<		3 1 1 1 111
No. of children enrolled 200   135   517   301   284   275   455   163   16		2,225 1,9 <b>5</b> 4 535 1
vaccinated	1	274

TABLE No. 7—Showing Total Defects of Children in Each School Examined by Dr. A. K. Bond and Miss Virginia B. Lorentz.

Defects.	St. Alphonsus'.	St. James'.	Cathedral.	St. Wenceslaus'.	St. Paul's.	St. Andrew's.	St. Katharine's.	Total,
Ear-							i	
DeafnessOtorrhœa	···· I	3						5 1
Eye— Blepharitis	1	12	7	6	6	14	15	61
Eye strain	]	5	2	I	4	2	2	16
Strabismus Tear-drop		3				I		3 I
Scalp— Pediculosis	10	31	10	6	29	14	16	116
Mouth— Teeth (defective)		14		15	9	12	3	53
Nose— Adenoids Rhinitis	3	13	4	5	9	20 I	25	79 I
Skin—			_		•	_	_	_
Impetigo Ringworm	2			I		I	I	7 I
Psoriasis		1						I
Throat— Tonsils (enlarged)	3	13	10	7	11	23	31	98
Miscellaneous— Adenitis	1		ı				3	4
Filth							I	1
Malnutrition Limp		2			2	<u>i</u>	I	5 1
No. of children enrolled.	95	335	103	233	346	271	317	1,700
No. of children examined No. of children defective.		335 62	102 37	22I 22	314 68	269 74	317 105	1,603 384
No. of children ordered	ı					]	)	
vaccinated	4	157	18	60	45	26	59	369
	1	l			<u> </u>	<u> </u>		<u> </u>

TABLE No. 8—Showing Total Defects of Children in Each School Examined by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

		.,						
,		S Mar	t. tin's.	Clavier's.	۲s.	ì	's.	
Defects.	St. Joseph's,	Boys.	Girls.	St. Peter C	St. Benedict's,	St. Pius'.	St. Gregory's.	Total.
Ear— Otitis media		<b></b>	I					I
Eye— Blepharitis Blindness Eye strain Opacity Strabismus Stye Scalp—	5 1 4 1 1	4	6 	I	 2  I	2	I 6 2	16 2 25 2 6 2
Pediculosis				I			2	7
Mouth— Teeth (defective) Cleft palate Nose—	4	5 I	2 I	5		4	I	20 3
Adenoids		9 1 	24 9 I	11 3	3 2	19 3	8 2 	81 20 1
Mental deficiency  Paralysis (infantile)  Skin—		· · · · I					2	2 I
Eczema Impetigo Ringworm Scabies Throat—				1 3 1 1				1 4 1 1
Tonsils (enlarged)	13	20	34	22	19	21	16	145
Adenitis. Enuresis. Deformities (rachitic) Malnutrition. Anæmia.		3  I 2		 I 5	2  2	1 2 	2	7 4 1 8 3

TABLE No. 8 (Continued)—Showing Total Defects of Children in Each School Examined by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

Defects.	St. Joseph's.	Boys. Boys.	t. tin's.	St. Peter Clavier's.	St. Benedict's.	St. Pius'.	St. Gregory's,	Total.
No. of children enrolled No. of children examined No. of children defective No. of children excluded No. of children ordered vaccinated	251 191 30 		274 256 54 	320 250 43 1	103 91 24 	165 140 30 	230 220 30 	1,602 1,359 258 1

MEDICAL EXAMINATION OF PAROCHIAL SCHOOLS.

Table No. 9—Showing Total Defects of Children in Each School Examined by Dr. R. A. Urquhart and Miss Agnes P. Kloman.

•	isti.	naculate Concepon.  Barnabas'.  Philip and James.					St. nn's.		
Defects.	Corpus Christi	Immaculate tion.	St. Barnabas'.	Sts. Philip at	St. Ann's.	St. Thomas'.	Boys.	Girls.	Total.
Ear— !									
Deafness		····			<u>I</u>		1 2	I 2	<b>2</b> 6
Blepharitis				3	2				5
Eye strain Strabismus Stve		4	8 	5 I		<u>.</u>		8	44 I I
Scalp—						I			
Pediculosis	8	9	6	12	18	II	9	5 <b>5</b>	128
Teeth (defective)	11	14	24	22	30	19	27	<b>3</b> 6	183
Adenoids	7	5	10	8	11	6	14	9	70
Paralysis (infantile)					2				2
Skin— Acne					I				I
Eczema		I			•.•••				I
Throat— Tonsils (enlarged)	3		5	6	11		70	8	-
Miscellaneous—	3	5	5	١	11	2	12	°	52
T. B. glands Malnutrition	8	6	8	10	13	8	12	10	2 75
No. of children enrolled. No. of children examined	129	170	158	173	335 286	107	272	292	1,636
No. of children defective	117 32	130 38	.113 39	44	84	84 33	215 68	208 86	1,271 <b>42</b> 4
No. of children excluded No. of children ordered	2	· · · · ·	4	3	. 3	4	2	7	25
vaccinated	18	17	12	23	66	10	55	40	241

MEDICAL EXAMINATION OF PAROCHIAL SCHOOLS.

TABLE No. 10—Showing Total Defects of Children in Each School Examined by Dr. Henry B. Kolb and Mrs. Henrietta E. Knorr.

Examined by Dr. He	nry	D,	NO	U ar	ia n	<i>175</i> .	пе	nrie		G. A	nor	<b>7.</b>
Defects.	(Front St.)	slaus'.	(Stiles St.)	St.	Patrick's.	iir's.	et's.	Elizabeth's.		Michael's.	sary.	
	St. Leo's (Front	St. Stanislaus'	St. Leo's (Stiles	Girls,	Boys.	St. Casimir's.	St. Bridget's.	St. Eliza	Girls.	Boys.	Holy Rosary	Total.
Ear—												
Deafness Otitis media Otorrhœa	 I I	 2 2	 3	 I I		 2 I	•••		 2 2		 I	1 12 8
Eye— Blepharitis				1			4	9	5		1	20
Conjunctivitis		1									I	2
Eye strain	• • •	2 I	• • •		• • •	· · · I	• • •	5			• • •	7 2
Strabismus		3						2	3	\ '	5	15
Stye	I	2		$[\ldots]$	I	4	Ţ	2	Ĭ	2	$ \ldots $	14
Scalp—		•	_				_					۷.
Pediculosis	4	30	7	9	• • •	9	5				• • •	64
Teeth (defective)	1	19	4		2	15	8	10	20	1	31	III
Nose								!	_	_		
Adenoids	16		19 38	17	7	51	23			16		339
Nervous System—	1 12	20	30	3	J	7	9	7	13	1	20	145
Paralysis (infantile).	١		]		<b></b>		1				!	1
Skin-	1	_		ļ		١.		1				
Ecthyma Eczema		I	I	· · ·	• • •	8	4	I	2		3	20
Impetigo		2		1:::			ī				···	3
Ringworm		·		1			١				ī	Ĭ
Scabies			1		<b> </b>	ļ	[	<b> </b>	<b> </b>	<b> </b>	<b> </b>	I
Dermatitis		• • •							ļ · · ·		1	I
Porrigo		<b> </b> · · ·	I	<b>}</b> ····		· · · ·		···			• • •	I
Tonsils (enlarged)	16	59	19	17	7	51	<b> </b>	25	58	16	48	316
Tonsilitis		I		]	]		]	<b> </b>	Į,			I
Miscellaneous-			ı	Į	_	}		1	]	_	] _	_
Adenitis			· · ·	:::		\···			I	3	I	6 1
T. B. of joints					1:::	2	l:::	1	l:::	1:::	Ì	3
T. B. of lungs	١	ı		<b>]</b>	1	<b> </b>		1	2		<b></b>	3
Malnutrition	j	4			Į	3	I	I	Į I		1	11
Wry neck	· · ·		···			···:	· · ·		···	• • •	I	2
Heart disease Cyst					:::	I	:::		I			2
-,				, •								

Table No. 10 (Continued)—Showing Total Defects of Children in Each School Examined by Dr. Henry B. Kolb and Mrs. Henrietta E. Knorr.

Defects.	St. Leo's (Front St.)	St. Stanislaus'.	St. Leo's (Stiles St.)	Girls. St.	Boys.   Patrick's.	St. Casimir's.	St. Bridget's.	St. Elizabeth's.	Girls. St	Boys. Michael's.	Holy Rosary.	Total.
No. of children enrolled. No. of children examined No. of children defective. No. of children excluded. No. of children ordered vaccinated	35 	800 716 135 4 218	147	187	151 12	533 520 103 	351 54 1	531	559 95 	218 21 	895 115 2	4,407

Table No. 11—Review of Defectives in White Schools Nos. 1, 4, 9, 10, 12, 22, 28, 29, 33, 34, 35, 70, 72, 76, 84, 92 and 95, by Dr. H. Warren Buckler and Mrs. Olivia C. Dawson.

•			
Defects.	Cured.	Improved.	Unimproved.
r			
Ear—			
Deafness	I	11	17
	I	5	I 2
Otorrhœa		4	2
Blepharitis		7.5	10
Eye strain	4 124	15 18	175
Keratitis	124	16	1/5 I
Opacity			8
Strabismus		16	19
Scalb—		10	19
Pediculosis	82	20	14
Mouth—	J_	. =0	
Teeth (defective)	l	16	503
Skin-			3-5
Eczema	1	1	
Impetigo	44		
Scabies	3		
Nose—	_		
Adenoids	108	5	559
Nervous System—			
Chorea		9	. 7
Epilepsy			5
Mental deficiency			131
Paralysis (infantile)		I	5
Throat—	06		.0.
Tonsils (enlarged)	86	6	384
Malnutrition	6	<b>6</b>	162
T. B. of spine		67 ·	102
		1	т
T. B. of lungs		T	1
Cong. lues		•	ī
cong. rues			
Total defects	459	196	2,005
			, ,

TABLE NO. 11 (Continued)—Review of Defectives in Colored Schools Nos. 106 and 109, by Dr. H. Warren Buckler and Mrs. Olivia C. Dawson,

Defects.	Cured.	Improved.	Unimproved.
Eye— Blepharitis Eye strain Keratitis Opacity	16	2 I	1 37 8 8
Scalp— Ringworm Mouth— Teeth (defective) Skin—	3	2	69
Impetigo Ringworm Nose— Adenoids	4		14
Nervous System— Chorea		I	8
Tonsils (enlarged)			. 39 9 21
T. B. of spine T. B. of glands			II
Total defects	24	6	226

Table No. 12—Review of Defectives in White Schools Nos. 2, 3, 6, 7, 8, 23, 24, 25, 26, 27, 38, 40, 42, 43, 47, 73. 77, 83, 93 and 97, by Dr. Henry B. Kolb and Mrs. H. E. Knorr.

Defects.	Cured.	Improved.	Unimproved.
Ear—			
Deafness		2	I
Otitis media	4	4	4
Otorrhœa	Ī	3	3
Cerumen	I	1	
Eve-		(	1
Blepharitis	49	27	34
Conjunctivitis	2	l	
Eye strain	<b>[</b>	59	44
Opacity			1 4
Strabismus	3	18	30
Stye	9		1
Pink-eye	2	1	1
Scalp—	1		i
Pediculosis	202	229	74
Seborrhœa	I		I
Mouth—			]
Teeth (defective)	146	8	253
Skin-			I
Eczema	2		I
Ichthyosis		I	
Impetigo	. 2		
Ringworm			
Scabies	I		
Ecthyma	22	I	
Furunculosis	2		
Cyst			2
Porrigo	2	I	I
Warts			I
Nose—			
Adenoids	222	17	403
Rhinitis	196	4	73
Nervous System—			ļ
Chorea	I	I	
Mental deficiency		I	5
Paralysis (infantile)		I	I
Defective speech			I
Facial paralysis	· · · · · · · · · · · · · · · · · · ·		I

Table No. 12 (Continued)—Review of Defectives in White Schools Nos. 2, 3, 6, 7, 8, 23, 24, 25, 26, 27, 38, 40, 42, 43, 47, 73, 77, 83, 93 and 97, by Dr. Henry B. Kolb and Mrs. H. E. Knorr.

Defects.	Cured.	Improved.	Unimproved.
Throat— Pharyngitis Tonsils (enlarged).  Miscellaneous— Adenitis Malnutrition T. B. of spine T'. B. of joints T. B. of lungs Anæmia Spinal curvature	8 II		402 12 10 2 1 13
Total defects	1,087	409	1,380

Table No. 12 (Continued)—Review of Defectives in Colored Schools Nos. 105 and 108, by Dr. Henry B. Kolb and Mrs. H. E. Knorr.

Defects.	Cured.	Improved	Unimproved.
Eye— Blepharitis Conjunctivitis Mouth— Teeth (defective) Nose— Adenoids Rhinitis Throat— Tonsils (enlarged) Miscellaneous— Malnutrition T. B. of lungs Total defects	9 4 9		9 22 2 2 22

TABLE No. 13—Review of Defectives in White Schools Nos. 5, 14, 16, 20, 21, 31, 32, 39, 45, 58, 61, 79, 80 and 94, by Dr. R. A. Urquhart and Miss A. P. Kloman.

Defects.	Cured.	Improved.	Unimproved.
Ear—			
Deafness	2	-	-
Otorrhœa	6	5	7
Eye—	U	1	•
Blepharitis	2	1	
Coryza	. 5	•	
Eye strain	109	18	64
Strabismus	5	2	10
Stve	J	·	
Scalp—	•		
Alopecia	1		\
Pediculosis	103	111	93
Ringworm	3	3	
Seborrhœa		Ĭ	1
Mouth—			
Teeth (defective)	161	75	331
Skin—			
Acne	2	3	
Eczema	4		
Impetigo	12	]	
Scabies			1
Herpes	2	]	] <b></b>
Nose-			
Adenoids	75	1	137
Nervous System—			
Chorea	3	· · · · · · · · · · · · · · · ·	• • • • • • • • •
Throat—	• • • • • • • •	2	
Tonsils (enlarged)		_	
Miscellaneous—	54	5	101
Malnutrition	0.5	48	40
Enuresis	25 4	40	48
T. B. of joints	4	т	
T. B. of glands	I	1	1
Total defects	580	277	793
	3	-,,	, , ,
		<u> </u>	<u> </u>

Table No. 13 (Continued)—Review of Defectives in Colored Schools Nos. 103, 107 and Branch, 110, 111, 112, 113, 116 and 118, by Dr. R. A. Urquhart and Miss A. P. Kloman.

Defects.	Cured.	Improved.	Unimproved.
Ear— Deafness	ı	2	3
Eye—		2	3
Blepharitis	ı		
Coryza	2		
Eye strain	38	22	55
Strabismus		I	7
Scalp—			
Pediculosis	12	5	3
Ringworm	46	25	· II
Seborrhœa	I		
Teeth (defective)	27	30	290
Skin—	-/	30	290
Ichthyosis		1	1
Impetigo		. 2	
Scabies	6	]	]
Nose—		ł	
Adenoids	27		82
Nervous System—		Į.	
Epilepsy		I	
Throat—		1	
Tonsils (enlarged)	. 25	6	70
Miscellaneous—	3	Ŭ	,,,
Malnutrition	24	52	73
Enuresis	I	I	2
T. B. of spine		2	I
T. B. of joints		3 8	
T. B. of glands	.,	8	12
Rachitic defects	2	5	7
Total defects	213	166	617
		100	01,
	·	·	<del></del>

Table No. 14—Review of Defectives in White Schools Nos. 13, 37, 50, 51, 53, 54, 55, 56, 57, 71, 74, 83, 85 and 99, by Dr. A. K. Bond and Miss V. B. Lorentz.

•			
Defects.	Cured.	Improved.	Unimproved
Ear— Deafness	10	1	10
Otitis media			I
Otorrhœa	3	I	3
Eye—			_
Blepharitis	111	45	45
Conjunctivitis	3		
Coryza	2	] • • • • • • • • •	
Eye strain	130	7	46
Strabismus	5	2	7
Stye Ptosis	5	ī	• • • • • • • • •
Scalp—		1	• • • • • • • •
Pediculosis	272	114	70
Ringworm	-,- I		
Mouth—	_		
Teeth (defective)	97	7	<i>7</i> 6
Skin-		, i	
<u>A</u> cne			1
Eczema	6		I
Ichthyosis			4
Impetigo	10	[ • • • • • • • • •	• • • • • • • •
Ringworm	3		• • • • • • • • •
Scabies Furunculosis	I		
Nose—	1		
Adenoids	404	19	239
Rhinitis	8	19	239
Nervous System—	Ū		
Mental deficiency		l	2
Throat —			
Pharyngitis	I		
Tonsils (enlarged)	357	21	310
Acute Tonsilitis	3		
Laryngitis	I	[	
Miscellaneous—			
Adenitis	24	I	5
Malnutrition	10 6	2 I	2
Heart disease (abscess)	0	1	• • • • • • • •
izeart discase (absects)	1		
Total defects	, 1,4 <b>7</b> 5	222	822

TABLE No. 14 (Continued)—Review of Defectives in Colored School No. 115, by Dr. A. K. Bond and Miss V. B. Lorentz.

Derects.	Cured.	Improved.	Unimproved.
Eye—  Blepharitis	2	, I	. I 2
Adenoids	I		5
Tonsils (enlarged)	. 6		5
Total defects	9	I	13

Table No. 15—Review of Defectives in White Schools Nos. 11, 15, 19, 30, 48, 59, 60, 62, 63, 64, 67, 68, 75, 78, 81, 86 and 98, by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

Defects.	Cured,	Improved.	Unimproved.
Ear—			
Deafness		27	4
Otitis media		3	
_ Otorrhœa	I	11	I
Eye—	1		
Blepharitis	16	55	21
Conjunctivitis	I	Ī	1
Eye strain	7	160	84
Opacity			4
Strabismus	2	45	24
Stye	12		
Nystagmus	1	I	
Blind in one eye		Ī	2
Scalp—		-	_
Pediculosis	52	152	<i>7</i> 6
Seborrhœa	3	2	,,
Mouth—	, ,		
Teeth (defective)		181	102
Tongue-tie	3 6	101	102
Cleft palate		τ	ī
Skin-			
Acne		r	2
Eczema	2	5	2
Ichthyosis	:	5	I
Impetigo			ī
Ringworm		9	1
Nose—	2	•••••	
Adenoids	86		
Rhinitis		42	322
Nervous System—	49	10	3
Chorea		_	
Epilepsy		I	
Mental deficiency		I	
Paralysis (infantile)			22
Throat—	[·····	12	• • • • • • • •
Pharyngitis	1	_	
Tonsils (enlarged)		I	
tonone (chiarged)	84	205	. 562

Table No. 15 (Continued)—Review of Defectives in White Schools Nos. 11, 15, 19, 30, 48, 59, 60, 62, 63, 64, 67, 68, 75, 78, 81, 86 and 98, by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

Defects.	Cured,	Improved.	Unimproved.
Miscellaneous— Adenitis Malnutrition Enuresis T. B. of spine T. B. of joints Macrocephalous Hernia Anaemia Total defects		137 95 5 1 2 	24 39 2 1 18

Table No. 15 (Continued)—Review of Defectives in Colored Schools Nos. 100 and 118 Branch, by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

Defects.	Cured,	Improved,	Unimproved.
Ear—			
Deafness			I
Eye—	1 1		
Blepharitis		I	
Coryza			
Eye strain		3	6
Strabismus	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • •	2
Obstruction of tear-duct	I		
Scalp— Pediculosis			
Ringworm			3 3
Mouth—	1		ა
Teeth (defective)		4	7
Skin—		7	. *
Eczema	!	1	
Ringworm		3	
Nose-	i i	- 1	
Adenoids			7
Nervous System—	1	.	
Mental deficiency			· <b>I</b> ,
Paralysis (infantile)'	[	I	
Throat—		. 1	
Tonsils (enlarged)	[]	5	33
Miscellaneous—	i !		_
Malnutrition		4	I
T. B. of spine			
Anaemia			4
Tuacina			
Total defects	2	24	68

Table No. 16—Review of Defectives in Parochial Schools Fourteen Holy Martyrs', St. Joseph's, St. Peter's, St. Jerome's, St. Mary's, Holy Cross and Our Lady of Good Counsel, by Dr. H. Warren Buckler and Mrs. Olivia C. Dawson.

Defects.	Cured.	Improved.	Unimproved.
Ear—			
Deafness		3	5
Otitis media		I	•••••
Eye—			
Blepharitis	5	4	13
Eye strain	32	3	40
Opacity		I	1
Strabismus		3	10
Scalp— Pediculosis			
Mouth—	14		
	_		188
Teeth (defective)	9	• • • • • • • • • •	100
Skin-	_		
Impetigo	2		
Psoriasis	2		
Ringworm	3		
			-0
Adenoids	27	I	98
Nervous System—			
Chorea	• • • • • • • • •	4	· · · · · · · <u>·</u> · ·
Epilepsy	• • • • • • • •	• • • • • • • • • •	I
Mental deficiency		• • • • • • • • • •	15
Paralysis (infantile)		• • • • • • • • •	3
			6.
Tonsils (enlarged)	15	2	63
Malnutrition			
Manual Hon	5	21	33
Total defects	77.4	42	470
Total defects	114	43	470
<u> </u>			<u> </u>

Table No. 17—Review of Defectives in Parochial Schools St. Patrick's (Male and Female), St. Casimir's, St. Leo's (Front Street), St. Bridget's, St. Michael's (Male and Female), St. Leo's (Stiles Street), St. Elizabeth's, St. Stanislaus' and Holy Rosary, by Dr. H. B. Kolb and Mrs. H. E. Knorr.

. Defects.	Cured.	Improved.	Unimproved.
Ear— Deafness Otitis media Otorrhœa  Eye— Blepharitis Conjunctivitis Eye strain. Strabismus	2	I I I 2 4 2	3 
Stye Ptosis Scalp— Pediculosis	3I	25	 б
Mouth— Teeth (defective) Cleft palate Skin— Eczema		I	54 I
Ecthyma	3 15		
Adenoids	54 66	. 21	180 40
Tonsils (enlarged)	54 2	21	180
Malnutrition	I	I	I
T. B. of lungs Torticollis		I	3
Total defects	275	81	485

Table No. 18—Review of Defectives in Parochial Schools Mt. Olivet (Colored), St. Pius', St. Martin's (Male and Female), St. Joseph's, St. Benedict's, St. Peter Clavier's and St. Gregory's, by Dr. A. L. Fehsenfeld and Miss M. A. Gorter.

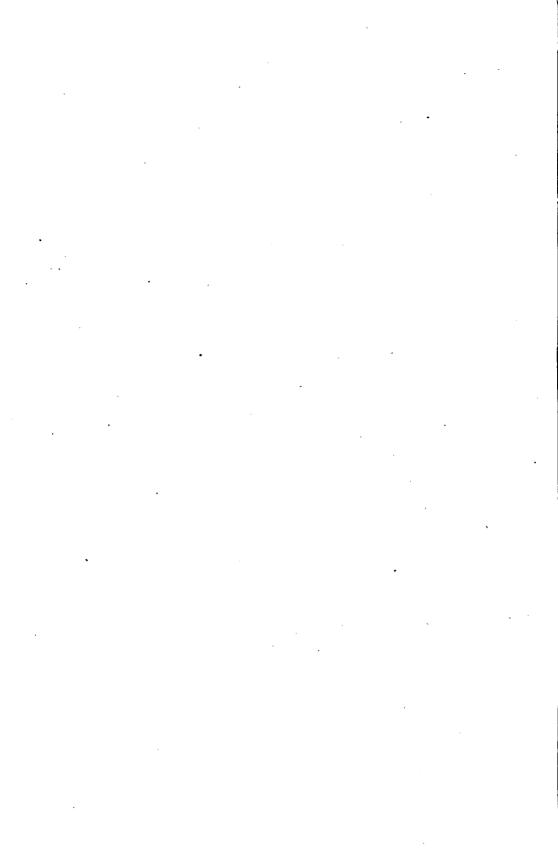
Defects.	Cured.	Improved.	Unimproved.
r	1		
Ear— Otitis media			
Eve—		1	
Blepharitis	2		
Eye strain		2 18	7 8
Opacity		10.	
Strabismus		2	T
Blind in one eye		. 2	T
Scalp—		1	1
Pediculosis	2	8	ı
Ringworm			ī
Mouth—	.	1	•
Teeth (defective)		7	13
Cleft palate			1 T
Skin-		1	1
Eczema		l I	}
Impetigo		1	
Nose-	_		
Adenoids	. 8.	13	53
Rhinitis	9	13	Ì
Nervous System—		1	
Mental deficiency		1	1
Paralysis (infantile)		2.	1
Throat—		ĺ	1
Tonsils (enlarged)	. 8	38	i 80
Miscellaneous—		1 .	1
Adenitis	. 2	5	I
Malnutrition		3	1. 1
Enuresis	.	2	1
Anaemia	.	l I	1
Total defects	. 32	100	179

TABLE No. 21-Individual and Total Work of School Nurses.

	Pupils Inspected at School.	Pupils Inspected at Home.	Pupils Treated at School.	Pupils Treated at Home.	Number of Visits to Homes.	Number of Visits to Dispensaries.
Miss A. P. Kloman— October, 1913 November, 1913 December, 1913 January, 1914 February, 1914 March, 1914 April, 1914 May, 1914	1,046 1,025 673 733 1,030 785 606 1,040	30 31 26 38 12 21 20 31	I I 2 3	4 1 I	.148 120 139 139 72 92 63 119	3 12 15 8 1 23 9
Total	6,938	209	8	9	892	115
Miss M. A. Gorter— October, 1913 November, 1913 December, 1913 January, 1914 February, 1914 March, 1914 April, 1914 May, 1914	1,040 857 612 1,209 949 502 528 576	59 51 22 35 35 25 19	18 26 25 23 13 6 31	1 17 1 6 1	137 102 95 110 110 115 104 74	1 5 8 57 17 14 4
Total	6,273	262	149	27	847	106
Miss V. B. Lorentz— October, 1913 November, 1913 December, 1913 January, 1914 February, 1914 March, 1914 April, 1914 May, 1914	1,944 1,433 1,376 2,223 1,588 1,864 1,849 1,618	32 50 23 26 28 30 39 37	I 4	3 3 3	165 173 67 85 75 105 97	3 9 12 12 7 7 2 18
Total	13,895	265	8	16	857	70

TABLE No. 21 (Continued)—Individual and Total Work of School Nurses.

•						
	Pupils Inspected at School.	Pupils Inspected at Home.	Pupils Treated at School.	Pupils Treated at Home.	Number of Visits to Homes.	Number of Visits to Dispensaries.
Mrs. H. E. Knorr— October, 1913. November, 1913. December, 1914. January, 1914. February, 1914. March, 1914. April, 1914. May, 1914. Total.	1,863 3,273 2,782 2,502 2,439 4,820 2,905 4,986	4 9 12 9 12 4 3	2 6 8	2 · 4 · · · 2 · 3 · · · · 11	131 179 98 160 82 3 129 153	1 13 1 11 5 16 12 15
Mrs. Olivia C. Dawson— October, 1913 November, 1913 December, 1913 January, 1914 February, 1914 March, 1914 April, 1914 May, 1914 Total	2,368 1,947 396 646 654 622 895 1,185	2 13 13 28 16 16 13 20	118 11 13 11 14 15 16	10 18 4 2 2	168 151 145 130 126 123 83 96	5 28 7 5 9 12 8 7



# SPECIAL TABLES

**TUBERCULOSIS** 

**PNEUMONIA** 

BRONCHO-PNEUMONIA

**BRONCHITIS** 

ALIMENTARY CANAL

**INANITION** 

**MARASMUS** 

**CANCER** 

**HEART DISEASES** ·

BRIGHT'S DISEASE

TYPHOID FEVER

SCARLET FEVER

**DIPHTHERIA** 

WHOOPING COUGH

**MEASLES** 

GENERAL

Deaths from All Causes, by Wards, Age, Sex and Color, Including Bay

Non-Residents,

	ıts.	Une	der 1	Moi	nth.	Bet	ween Mor	ı an nths.	ıd 3
Wards.	Non-Residents.	Wh	ite.	Colo	red.	White.		Colored	
	Non-	M.	F.	М.	F.	М.	F.	М.	F.
First. Second Third. Fourth Fifth Sixth. Seventh Eighth Ninth. Tenth Eleventh Twelfth. Thirteenth Fourteenth Fifteenth Sixteenth. Seventeenth Eighteenth Twethth Theoreteenth Fifteenth Sixteenth Sixteenth Sixteenth Seventeenth Eighteenth Twenty-forst Twenty-forst Twenty-forth Bay View, not in city wards Sydenham, not in city wards.	2 2 166 18 1 555 1 1 4 4 2 2 166 1 1 4 4	222 18 21 13 5 5 9 19 16 13 11 1 1 22 8 7 13 2 1	255 111 144 88 7 155 99 133 7 7 66 1 1 100 99 133 5 7 7 133 15 100 100 100 100 100 100 100 100 100	3 1 2 8 5 6 18 6 5 · · · · · · · · · · · · · · · · · ·	5 3 2 6 2 1	111 7 7 4 4 2 2 1 1 4 4 4 4 4 4 2 2 6 6 4 4 2 2 3 3 5 5 1 1 5 5 1 5 5 1 5 5 1 5 8 1	4 111 5 2 3 3 1 1 2 5 5 5 41 1 16 7 7 1 1 5	11 66 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Bay View, in city wards Sydenham, in city wards Mount Wilson, in city wards					I	· · · · · · · · · · · · · · · · · · ·	2	····	2

<sup>†</sup>Chinese.

TABLE No. 1.

View, Sydenham and Mount Wilson Sanatorium, But Not Including Year 1914.

	ee M 12 M			Bet		ı an ars.	ıd 2	Bet		2 an ars.	ıd 3	Between 3 and Years.			
Wh	ite.	Colo	red.	Wh	ite.	Colo	Colored.		White.		ored.	White. Colore		Colored	
M.	F.	М.	F.	M.	F.	М.	F.	М.	F.	М.	F.	M.	F.	М.	F.
29 29 16 4 4 5 12 11 16 6 11 12 22 11 11 13 13 15 20	30 30 8 4 11 18 13 17 3 10 27	9  9 10 7 17 9 7 1 11 2 3	4 32 2 3 10 4 2 3 8 5 13 7 3  4 2 7	122 100 100 100 100 100 100 100 100 100	3 6 4 6 12	3 3 4 9 4 7 4 3 1 4 1 2	3 2 1 6 5 6 1 1 1 3 2 1	66 22 33 II 44 33 44 II 32 44 II 466 446		1 44 1 1 2 2 4 4 1 1	3  3 I	31	1	2 1 7 2 1 1	13
3	9		2	I	2	····		3	2	 	::::				

Continued on next page.

GENERAL TABLE

Deaths from All Causes, by Wards, Age, Sex and Color, Including Bay

Non-Residents,

	Bet		4 ar ars.	ıd 5	Between 5 and 9 Years.				
Wards.	Wł	ite.	Colored.		W	ite.	Cole	ored.	
	M.	F.	M.	F.	M.	F.	М.	F.	
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Ffourteenth Fifteenth Sixteenth Seventeenth Twetteenth Twentjefth Twenty-fourth Twenty-fourth Bay View, not in city wards Sydenham, not in city wards	4 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	I	1 1 2 2 2 2	2 2 3 I .	8 4 4 2 2 2 3 3 5 1 1 4 4 2 2 1 2 2 4 4 2 2 3 3 5 5	8 1 3 3 2 2 2 2 2 3 3 1 1 3 3 6 6 54	2 2 1 1 3 3	3 1 4  3  1 	
Bay View, in city wards								I	

No. 1 (Continued).

View, Sydenham and Mount Wilson Sanatorium, But Not Including Year 1914.

Betw	een Ye:		d 14	Bet	ween Ye	15 ar ars.	19	Bet	Between 20 and 24 Years.				Between 25 and 29 Years.			
Whi	te.	Colored. White. Colored		ored.	Wi	ite.	Colored.		White.		Colored.					
M.	F.	М.	F.	M.	F	M.	F.	M.	F.	<b>M</b> .	F.	M.	F.	М.	F.	
2 1 2 2 2 1 1 4 2 1 3 3 1 2 4 3 2 3 2 4 2	2 5 5 2 2 1 1 2 2 2 1 1 2 1 3 3 1 1	1 1 2 1 1 1 1 2 1 1 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1	I 2 2 I 1 I 2 I 3 I	1 2 3 3 1 1 5 2 2 3 3 3 1 1 1 4 2 2 2 1 1 4 4 2 2 5 5 3 3 2	6 3 3 1 4 4 5 5 5 3 1 1 2 2 2 5 6 6 1 4 3 2 2 3 1 5 5 5 1 74 2	3 3 2 2 2 2 2 2 1 I I	I I 4 4 I I 3 3 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 2 I I 5 4 4 4 2 I I 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	5 5 5 1	111 55 116 86 67 75 22 48 83 96 61 22 35 11	37751111222554433100422151133	33 33 55 1 2 4 4 6 9 3 16 5 5 5 5 5 1 1 78 12 78	77 77 10 77 11 122 66 77 31 88 66 10 67 71 72 137 14	77788166766433224466622255244566522277		1 3 4 4 4 3 3 3 1 1 6 2 10 8 8 4 1 1 1 1 6 6 1 10 6 1 10 75 9 10	

Continued on next page.

GENERAL TABLE

Deaths from All Causes, by Wards, Age, Sex and Color, Including Bay

Non-Residents,

	Bet	ween Ye	30 ar ars,	ıd 34	Between 35 and 3 Years.			
Wards.	Wh	ite.	Cole	ored.	Wł	nite.	Colored.	
	M.	F.	М.	F.	M.	F.	M.	F.
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fifteenth Sixteenth Sixteenth Sevententh Fifteenth Twenty-first Twenty-fourth Bay View, not in city wards Sydenham, not in city wards	12 10 9 6 2 8 8 5 5 10 6 6 6 3 4 4 4 1 1 10 9 8 8 7 7 4 4 5 5 8 3 3	8 44 66 6 1 6 8 8 11 5 5 1 1 2 2 2 6 6 3 3 3 3 6	22 11 28 8 11 22 6 44 44 11 45 55 99 66 4 3 44 3 2	14 4*5 3 3 11 12 13 14 14 15 15 66 44 11 33 33 33 33 	11	6 7 7 9 6 2 2 2 2 1 3 3 5 5 3 3 6 6 2 2 1 1 4 4 6 6 8 8 1 1 6 8 8 1 1 6 8	64 47 75 33 22 23 38 85 51 16 68 66 133 66 22 55 55 11	6
Totals	155	104	<b>7</b> 6	56	166	132	99	84
Bay View, in city wards		3	12	5		10	`12	7

<sup>\*</sup>Japanese.

No. 1 (Continued).

View, Sydenham and Mount Wilson Sanatorium, But Not Including Year 1914.

Betwee Y	Between 40 and 44 Between 45 and 49 Years.					Bet	Between 50 and 54 Years.				Between 55 and 59 Years.			
White.	nite. Colored. White. Colored.		Wi	White.		Colored.		White.		ored.				
M. F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.
9 17 15 9 7 1 9 8 3 4 11 5 5 5 8 1 7 6 14 7 9 6 6 9 6 6 9 6 6 204 13:	8 I I I I I I I I I I I I I I I I I I I	5 5 5 11 1 7 7 3 3 3 3 6 3 3 8 8 8 3 10 2 2 3 3 2 4 4 4	155 111 88 100 100 88 122 100 88 122 100 111 113 113 113 115 115 115 115 115 115	6 9 3 2 8 9 15 8	57 22 33 11  50 40 †1	1 6 6 122 3 1 1 1 1 5 3 3 1 1 5 5 3 3 13 3 6 6 6 6 2 2 2 2 2 888 — III	133 199 177 155 122 133 111 111 111 188 100 100 66 122 99 177 4 4 100 100 66 122 33 259 — 255	7 4 7 9 5 2 4 10	33 77 77 77 33 55 22 22 33 66 11 100 17 22 33 55 †88 66 11 101 101 181	II // 44 II II 44 II 44 II 44 II 44 II 45 II 47 II 48 II 49 II	200 155 200 88 144 77 133 88 99 100 66 88 133 166 77 77 77 2755 244	10 5 3 10 12 6 17 6 10 10 7	3 3 4 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	1 5 1 2 2 6 3 6 7 2 15 5 5 2 6 1 2 6 1 70 — 7

†Chinese.

Continued on next page.

GENERAL TABLE

Deaths from All Causes, by Wards, Age, Sex and Color, Including Bay

Non-Residents,

-	Bėt <sup>,</sup>		60 ar a <b>r</b> s.	nd 64	Between 65 and 6 Years.			
Wards.	White.		Colored.		Wh	ite.	te. Colore	
	M.	F.	M.	F.	M.	F.	M.	F.
First Second Third Fourth	12 8 8	7 7 7 11	4 3	 I I	16 7 7 12	8 12 8 4	 I I	
Fifth Sixth Seventh Eighth Ninth	7 18 14 23	14 13 17	6 3 2 1 1	5 2	7 14 12 12	4 22 11 17	7 2 I	1
Tenth Eleventh Twelfth Thirteenth	15 18 10 8	14 14 8 14	5 	1 1 5 4	17 9 18 20	10 10 12 14 15	1 4 2 1	
Fourteenth Fifteenth Sixteenth Seventeenth	9 8 18 3	11 19 19 2	5 7 1	6 4 6 10	11 14 11	15 19 22 5	3 4 †1 11	ı
Eighteenth Ninéteenth Twentieth Twenty-first	9 12 16 6	13 8 8 15	6 I 	5 I 	11 10 11	14 6 10 9	4	
Twenty-second	5 6 14	7 2 20 3	7 2 5	5 I 	8 5 9	4 4 13	2 I 	
Sydenham, not in city wards  Totals	274		70	62	268	269	47	4
Bay View, in city wards				8			6	

<sup>†</sup>Chinese.

No. 1 (Continued).

View, Sydenham and Mount Wilson Sanatorium, But Not Including Year 1914.

Betwe	een ; Yea		d 74	Bet	ween Ye	75 an ars.	ıd <b>7</b> 9	Bet		80 an	ıd 84	Between 85 ar Years.			nd 89
White	e.	Colc	red.	Wł	ite.	Cold	ored.	Wh	ite.	Colo	ored.	Wł	ite.	Colo	ored.
M.   I	F.	M.	F.	M.	F.	М.	F.	М.	F.	M.	F.	M.	F.	М.	F.
15 10 12 14 7 12 14 5 11 16 16 7 4 12 7	12 14 8 6 5 12 7 13 18 16 8 4 21 13 4 4 8 14 11 11 12 5 6 6 6 6 6 7 7 13 13 14 14 15 15 16 16 16 16 17 17 17 17 17 17 17 17 17 17 17 17 17	1 1 2 1 3 3 2 4 1 1 4 2 2 1 1 6 6 3 3 1 1 2 3 3 1 1 3 9 8 6	3 2 3 3 1 1 1 6 6 1 1 2 3 3	8 3 2 2 10 0 2 2 9 6 6 8 8 8 11 12 7 7 9 8 12 10 4 4 8 8 12 13 2 2 1 1 7 7 4 3	98 8 4 4 5 5 12 4 11 11 14 13 15 14 7 7 15 13 12 20 10 4 10 10 10 10 10 10 10 10 10 10 10 10 10		2 3 1 1 1 1 6 6 1 1 2 2 1 1 1 1 1 1 1 1 1 1	4 4 2 4 3 12 5 5 4 4 9 9 10 3 8 8 5 7 7 7 1 5 5 7 6 4 4 4 4 2 2   132   6	6 7 3 3 7 7 3 3 9 6 6 4 7 7 8 8 100 100 100 100 100 100 100 100 100	      	I I I 2 2 I I 2 2 I I 2 2 I I I I I	33 1 1 2 2	33 33 57 78 86 61 1 59 93 33 66 83 35 52 11 66 9	I I	2 I 2 6

GENERAL TABLE

Deaths from All Causes, by Wards, Age, Sex and Color, Including Bay

Non-Residents,

	Bet		90 an ars.	ıd 94	Between 95 and 99 Years.				
Wards.	White. C		Cold	ored.	White.		Colore		
	M.	F.	M.	F.	M.	F.	M.	F.	
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fifteenth Sixteenth Sixteenth Twenty-first Twenty-fourth Twenty-fourth Twenty-fourth	1 2 2 1 3 3 3 1 2 1	3 1 1 2 1 4 2 2 3 3 2 1 1 2 2 2 1 1		I I I 2	I	1 I I 22 I I I I I I I I I I I I I I I I		I	
Bay View, not in city wards Sydenham, not in city wards	I	2 			· · · · ·			 	
Totals	14 	34							

No. 1 (Continued).

View, Sydenham and Mount Wilson Sanatorium, But Not Including Year 1914.

Betw	veen 10 Ye	o and ars.	109		To	tals.		
Wh	ite.	Cole	ored.	Wh	ite.	Cold	ored.	Grand Total
М.	F.	M.	F.	M.	F.	M.	F.	Grand
I			I	245 194 171 149 84 207 165 225 188 181 84 146 163 149 49 152 162 186 141 111 135 192 58	205 173 133 93 80 161 157 177 150 164 121 163 133 187 189 169 45 171 139 175 175 175 174 69 114	1 12 34 88 76 44 51 20 18 50 72 54 8 103 97 62 193 76 44 8 53 70 41 2 20	2 4 31 92 69 47 45 18 11 30 87 49 60 195 68 32 47 68	453 383 369 422 309 459 418 440 367 425 364 412 331 570 538 440 482 467 395 318 322 395 3112
I			1	3,889	3,542	1,297	I,240	9,968
				202 7 5	95 5 13	I49 2	118	564 12 24

Average Age at Death, White and Colored (including Non-Residents), Years 1912, 1913 and 1914.

Year.	Total Deaths.	Total Ages.	Average Age at Death.
1912.			
White	7,835 2,606	313,898.79 78,995.52	40.063 30.312
1913.	·		
White	7,951 2,765	310,492.82 85,448. <b>7</b> 6	39.050 30.903
1914.			
White	7,914 2,637	328,686 .63 84,097 .56	. 41.532 31.891

# Deaths of Non-Residents from All Causes During 1914.

	Wł	ite.	Cole	rå.	
Cause of Death	М.	F.•	М.	F.	Totals.
I—General Diseases.					
1. Typhoid fever	7	4	4	ı	16
2. Typhus fever		•			
3. Relapsing fever					
4. Malaria	I				I
5. Smallpox					
6. Measles	I	I			2
7. Scarlet fever			l		
8. Whooping cough	I		2		3
o. Diphtheria and croup	2				2
10. Influenza			١		
II. Miliary fever					
12. Asiatic cholera		: .			
13. Cholera nostros					
14. Dysentery			ĺ	!	
15. Plague					
16. Yellow fever					
17. Leprosy					
18. Erysipelas	3				3
19. Other epidemic diseases					
20. Purulent infection and septichaemia	7	I			8
21. Glanders					
22. Anthrax					
23. Rabies					
24. Tetanus	3		I		4
25. Mycoses				• • • •	
26. Pellagra		I			I
27. Beriberi					
28. Tuberculosis of the lungs	7	3	I		14
29. Acute miliary tuberculosis			<b>*</b> I	i	, .
30. Tuberculosis meningitis	1				3
31. Abdominal tuberculosis	I	1	2	I	4
32. Pott's disease				• • • •	2
33. White swellings	I	• • • •	• • • •		I
34. Tuberculosis of other organs	2	,	· · · ·		2
35. Disseminated tuberculosis				I	I
36. Rickets	· · · · · <u>·</u>	· · · ·			
37. Syphilis	3		·I	1	5
38. Gonococcus infection		· · · ·	· · · ·		
39. Cancer and other malignant tumors of	.	1	1	'	4
the buccal cavity	' 4	1	1	í	1 4

<sup>\*</sup>Chinese.

Deaths of Non-Residents from All Causes During 1914—Continued.

	W	ite.	Cole	ored.	
CAUSE OF DEATH.	М.	F.	M.	F.	Totals.
			!		
40. Cancer and other malignant tumors of the stomach, liver	13	3			16
41. Cancer and other malignant tumors of					
the peritonaeum, intestines, rectum 42. Cancer and other malignant tumors of	9	4		• • • •	13
the female genital organs		17			17
43. Cancer and other malignant tumors of					
the breast		2	<i>.</i>		2
44. Cancer and other malignant tumors of	,		}		
the skin	3				3
other organs and of organs not spec-			1	i '	
ified	13	10		[	23
46. Other tumors (tumors of the female					
genital organs excepted)					I
48. Chronic rheumatism and gout					ī
49. Scurvy	•				
50. Diabetes	5			1	11
51. Exophthalmic goitre					3
52. Addison's disease	· · · · ;	I			1 4
53. Leuchaemia	4 2				3
55. Other general diseases					I
56. Alcoholism (acute or chronic)	3	۱	l 1		4
57. Chronic lead poisoning 58. Other chronic occupation poisonings					
58. Other chronic occupation poisonings		• • • •			
59. Other chronic poisonings	• • • • •				
II—Diseases of the Nervous System and of the Organs of Special Sense.					
60. Encephalitis	1				1
61. Simple meningitis	2	3	I	ļ	6
62. Locomotor ataxia		1			
63. Other diseases of the spinal cord 64. Cerebral haemorrhage, apoplexy	I	··· <u>:</u>			I 14
65. Softening of the brain	1		3	3	14
66. Paralysis without specified cause	ı	1: : : :			I
67. General paralysis of the insane	· T	2	1		3
68. Other forms of mental alienation	_	1			2
69. Epilepsy					
70. Convulsions (nonpuerperal)	1			1	1

Deaths of Non-Residents from All Causes During 1914—Continued.

	, WI	nite.	Cole	ored.	١.
Cause of Death.	M.	F.	M.	F.	Totals
71. Convulsions of infants	3	 2			5
III—Diseases of the Circulatory System.  77. Pericarditis 78. Acute endocarditis 79. Organic diseases of the heart 80. Angina pectoris 81. Diseases of the arteries, atheroma, aneu-	1 3 14				2 9 23 I
ryism, etc	9 4 		••••		, 12 4 I
84. Diseases of the lymphatic system (lymphangitis, etc.)					2
IV—Diseases of the Respiratory System.  86. Diseases of the pasal fossae					
87. Diseases of the larynx.  88. Diseases of the thyreoid body.  89. Acute bronchitis  90. Chronic bronchitis  91. Broncho-pneumonia  92. Pneumonia  93. Pleurisy  94. Pulmonary congestion, pulmonary apoplexy  95. Gangrene of the lung.  96. Asthma  97. Pulmonary emphysema	I IO II 2	7 3	3	I	 1 
98. Other diseases of the respiratory system (tuberculosis excepted)					Ĭ

Deaths of Non-Residents from All Causes During 1914—Continued.

	W	nit <b>e</b> .	Cole	ored.	
CAUSE OF DEATH.	М.	F.	M.	F.	Totals.
V—Diseases of the Digestive System.					
99. Diseases of the mouth and annexa		ı			I
100. Diseases of the pharynx					
101. Diseases of the oesophagus					
102. Ulcer of the stomach	. 2	<b> </b> .			2
103. Other diseases of the stomach (cancer				( ,	
excepted)	. 1	_			2
104. Diarrhoea and enteritis (under 2 years).	5	2		I	8
105. Diarrhoea and enteritis (2 years and					
over)	I	2		,	3
106. Ankylostomiasis 107. Intestinal parasites	.		• • • •	• • • •	• • • •
108. Appendicitis and typhlitis					
109, Hernias, intestinal obstructions					27 - 21
110. Other diseases of the intestines	13	ī			21
III. Acute yellow atrophy of the liver			_		_
112. Hydatid tumor of the liver					
113. Cirrhosis of the liver	. 6				8
114. Biliary calculi	. 2	I			3
II5. Other diseases of the liver	2	1	1	ا ا	5
116. Diseases of the spleen					
117. Simple peritonitis (nonpuerperal)					
118. Other diseases of the digestive system					
(cancer and tuberculosis excepted)		2	• • • •		2
VI—Nonvenereal Diseases of the Genito- Urinary System and Annexa.					
119. Acute nephritis'	. 2	3	3		8
120 Bright's disease	25	3 6	7		39
121. Chyluria				] <u> </u>	
122. Other diseases of the kidneys and an-					
nexa	. 8		_	• • • •	10
.123. Calculi of the urinary passages	. 2	-		• • • •	3
124. Diseases of the bladder			• • • •	· · · ·	
abscess, etc					
126. Diseases of the prostate					8
127. Nonvenereal diseases of the male gen-				· · · ·	
ital organs			·		
128. Uterine haemorrhage (nonpuerperal)		l	l		
129. Uterine tumor (noncancerous)	1			1 +	6

Deaths of Non-Residents from All Causes During 1914—Continued.

	Wi	ite.	Cole	ored.	ŀ	
CAUSE OF DEATH.	M.	F.	M.	F.	Totals.	
<ul> <li>130. Other diseases of the uterus</li></ul>	1					
133. Nonpuerperal diseases of the breast (cancer excepted)	i					
VII—The Puerperal State.						
134. Accidents of pregnancy		6		 2 I	8 I	
sudden death			1	ĺ	İ	
VII—Diseases of the Skin and of the Cellular Tissue.						
142. Gangrene 143. Furuncle 144. Acute abscess 145. Other diseases of the skin and annexa.				I	6 1 1	
IX—Diseases of the Bones and of the Organs of Locomotion.						
<ul> <li>146. Diseases of the bones (tuberculosis excepted)</li> <li>147. Diseases of joints (tuberculosis and rheumatism excepted)</li> <li>148. Amputations</li> <li>149. Other diseases of the organs of locomotion</li> </ul>			Į	 	4	
X—Malformations.						
150. Congenital malformations (still-births not included)	I	2	 	  ∴	3	

Deaths of Non-Residents from All Causes During 1914—Continued.

	W	ite.	Cole	ored.		
CAUSE OF DEATH.	М.	F.	М.	F.	Totals.	
XI—Diseases of Early Infancy.						
151. Congenital debility, icterus and sclerema. 152. Other diseases peculiar to early infancy. 153. Lack of care	5 1	3 1	2		II 2	
XII-Old Age.						
154. Senility						
XIII—Affections Produced by External Causes.						
155. Suicide by poison  156. Suicide by asphyxia  157. Suicide by hanging or strangulation  158. Suicide by drowning  159. Suicide by firearms  160. Suicide by cutting or piercing instruments  161. Suicide by jumping from a high place.  162. Suicide by crushing  163. Other suicides  164. Poisoning by food.  165. Other acute poisonings.  166. Conflagration  167. Burns (conflagration excepted)  168. Absorption of deleterious gases (conflagration excepted)  169. Accidental drowning  170. Traumatism by firearms.	3	1	I		I 2 I I 7 2	
171. Traumatism by cutting or piercing instruments	 12	3				
174. Traumatism by machines. 175. Traumatism by other crushing (vehicles, railroad, landslides, etc.) 176. Injuries by animals. 177. Starvation 178. Excessive cold 179. Effects of heat. 180. Lightning.	· · · · · I	2	3		27 2  I	

Deaths of Non-Residents from All Causes During 1914—Continued.

	Wi	nite.	Cole	ored.	
Cause of Death.	М.	F.	M.	F.	Totals.
181. Electricity (lightning excepted) 182. Homicide by firearms 183. Homicide by cutting or piercing instruments 184. Homicide by other means	I				3
185. Fractures (cause not specified) 186. Other external violence	I	1			
187. Ill-defined organic disease					
Total	330	153	71	29	583

GENERAL

Deaths of Children Under Five Years of Age in

:	Un	der 1	Mo	Bet. 1 and 3 Mos.				
Wards.	Wi	iite.	Colo	ored	Wh	ite.	Colo	ored
	M.	F.	M.	F.	М.	F.	М.	F.
irst	22	25			11	4		
Second	18	II			7	11		
Chird	21	14		3	4	5	I	
ourth	13	8	.5	11	2	2	6	
Fifth	5	7	4	6	1	3	I	
Sixth	9	15	6	3	4	I	2	
Seventh	19	16	8	2	4	3	I	ĺ
Eighth	16	9			6	4	I	
Vinth	13	15	3		2	3	2	
Centh	11	9	2		6	ĭ	3	
Eleventh	5	2	3	5	4	2	2	
welfth	14	8	I	5	2	5	2	
Chirteenth	20	9	2	ĭ	9	5		ĺ
ourteenth	17	13	8	7	36		4	
ifteenth	9	7		ó	111	I	5	
Sixteenth	11	6	5 6	9 6	3	2	2	
Seventeenth	I	I	18	17	2	I	9	
Eighteenth	9	10	6	- 5	11	16	I	
Vineteenth	II	9	5	5 3	5		I	İ
wentieth	22	19		. 2	3	10	<u>-</u>	
wenty-first	8	3	2	6	2	7	3	
wenty-second	7	5	7	2	3	í	2	-
wenty-third	13	7	5	7	5	7	2	
wenty-fourth	21	13		ا أ ا	15	. 5		
ay View, not in city wards		13			-5		۱ <sup>۱</sup>	
ydenham, not in city wards							l	
y desired in only wards in the								
Total	315	242	96	-94	158	140	50	4

TABLE No. 2.

Each Ward, Not Including Non-Residents, Year 1914.

Bet	. 3 an	d 12 Ì	Mos.	Be	t. I <b>a</b> 1	1d 2 \	črs.	Be	t. 2 a1	nd 3 ?	Yrs.	Be	Zrs.		
W	nite.	Cole	ored.	Wi	nite.	Colo	ored.	Wi	nite.	Cole	ored.	Wi	nite.	Colo	ored.
Μ.	F.	M.	F.	М.	F.	M. `	F.	М.	F.	M.	F.	М.	F.	<b>M</b> .	F.
29 29 16 4 5 12 16 19 10 14 1 1 6 6 11 1 12 2 2 11 1 14 7 7 13 13 15 20	3 8 77 8 8 111 5 5 5 3 3 3 7 7 300 8 8 4 1 18 133 137 27	11 12 3 3	33 10 4 2 2 3 3 8 5 13 7 7 3	122 100 100 100 100 100 100 100 100 100	111 66 111 55 77 73 36 11 33 44 11 22 11 66 44 66 122	I 2	11 22 33 44 11 22 22 11 33 22	66 22 2 2 3 1 1 4 4 3 3 3 1 1 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 4 1 1 3 2 2 3 2 2 3 3 3 3 3 3 3 3	44 55 11 11 	1 4 1 1 2 4 1 1	1 3 3 2 1 3 3 2 2 2	2 4 4 3 3 I 4 4 3 3 I 1 3 3 4 4 4	2 4 4 2 2 I I I I I I I I I I I I I I I	2 1 7 7 2 2 1 1 1	I 2 I 1 2 2 I 1 2 2 I 1 I 1 2 I 1 I 1 2 I 1
307	271	122	95	145	114	68	48	46	39	19	16	31	23	21	13

## GENERAL TABLE No. 2 (Continued).

Deaths of Children Under Five Years of Age in Each Ward, Not Including Non-Residents, Year 1914.

	Be	t. 4 an	1d 5 Y	rs.		To	tal.		
Wards,	Wi	nite.	Colo	ored.	Wh	ite.	Colo	red.	Total
	M.	F.	М.	F.	М.	F.	M.	F.	Grand
First. Second. Third. Fourth. Fifth. Sixth. Seventh. Eighth. Ninth. Tenth. Eleventh. Twelfth. Thirteenth. Fifteenth. Sixteenth. Sixteenth. Sixteenth. Sixteenth. Twenty-fourte. Twenty-fourth. Bay View, not in city wards.	4 I I I I I I I I I I I I I I I I I I I	2   I     I       I       I       I       I       I       I       I       I       I       I       I       I       I           I	1 I 2 2 2 2	2 2	866 711 577 2557 166 350 577 322 444 111 29 555 911 355 444 39 33 33 47 73	755 61 50 144 244 32 28 30 42 28 23 7 19 28 50 18 54 28 50 15 33 36 33 15	37 11 25 8 9 7 19 17 28 37 28 32 32 32 17	1 1 1 8 28 28 18 13 8 5 5 4 4 22 2 30 8 48 17 9 12 1	162 134 118 104 69 90 125 102 733 82 63 80 89 231 120 84 115 137 87 90 66 106
Sydenham, not in city wards  Total	22		8	12	1,024		384	323	2,578

TABLE No. 1—Total Death Rate and Death Rates for White and Colored Population, Based on Census of 1910, from 1903 to 1914, Inclusive.

Year.	Estimated Population.*	Total Deaths.	Death Date per 1,000 of Population.	White. No. of Deaths.	White. Death Rate per 1,000.	Colored. No. of Deaths.	Colored. Death Rate per 1,000.	Chinamen.
1903	524,407 529,423 534,439 539,455 544,471 549,497 554,513 559,529 504,547 569,501 574,577 579,593	1,323 1,473 1,423 1,461 1,441 1,379 1,403 1,385 1,344 1,346 1,345	2.523 2.781 2.662 2.704 2.509 2.530 2.475 2.381 2.363 2.514 2.267	906 1,022 940 988 950 926 909 885 846 866 837 841	2.045 2.283 2.079 2.164 2.061 1.989 1.934 1.866 1.765 1.791 1.716	416 451 482 470 490 453 491 478 497 480 507 473	5.109 5.502 5.842 5.659 5.862 5.799 5.610 5.795 5.575 5.850 5.413	3 1  3 2 1

<sup>\*</sup>Corrected to July 1 of each year, according to census of 1910.

#### TUBERCULOSIS (ALL FORMS).

TABLE No. 2—Deaths Due to Tuberculosis Each Month in the Year 1914, by Sex and Color.

	Non- Residents.	S	ex.	Со	lor.	Total.*
Months.	Non- Resi	Male,	Female.	White.	Colored.	Total.*
January February March April May June July August September October November December	6 3 5 2 1 2 4 3 1	61 79 95 66 67 52 62 54 46 60 74	50 54 58 53 41 48 45 31 43 34 43 43	69 108 108 766 59 75 45 58 52 63 85	42 44 45 47 42 41 32 38 40 37 28 37	111 133 153 119 108 100 107 83 98 99 91
Total	30	778	536	841	473	1,314

<sup>\*</sup>Non-residents not included.

# TABLE No. 3—Deaths Due to Tuberculosis, Arranged According to Occupation, Year 1914.

V		,	
Attorneys	1	Engineers (electrical)	1
Artists	Ĩ	Engineers (marine)	ī
Actors	2	Engineers (mechanical)	ī
Agents (insurance)	2	Engineers (civil)	ī
Agents (real estate)	ī	Engineers (stationary engine)	3
Brewers	2	Elevator boys	
	_		2
Bakers	2 8		_
Barbers		Furniture movers	I
Bartenders	6	Factory hands	4
Boilermakers	I	Farmers	2
Bottlers	· 3	Farm laborers	6
Butchers	3	Firemen (stationary engine).	2
Bell boys	I	Grocers	I
Builders and contractors	5	Glassblowers	1
Brassworkers	3	Harnessmakers	I
Bricklayers	4	Hatters	2
Blacksmiths	3	Horse trainers	1
Boxmakers	5	Housewives	175
Bootblacks	5	Hodcarriers	-/3
Bookkeepers, clerks	<b>4</b> 5	Hucksters	5
Broommakers	43 I	Hostlers	3
Boat captains	I	Inspectors	ა 2
Bookbinders	I	Ironworkers	7
	- 1	Ice dealers	•
Carpenters	II	Tobbone	I
Candymakers	2	Jobbers	3
Chambermaids	3	Jockeys	I
Caulkers	I	Janitors	I
Chauffeurs	I	Laborers	188
Coal dealers	I	Launderers or laundresses	24
Cabinetmakers	4	Laundry work (steam)	· 2
Collectors	I	Lawyers	I
Coachmen	I	Laboratory workers	I
Clergymen	Ι,	Lamp lighters	I
Canmakers	5	Livery stable keepers	I
Cigarmakers	IO	Locksmiths	I
Cooks	16	Lumbermen	2
Coopers	1	Machinists	. 6
Cutters	10	Polishers	5
Cloth pressers	I	Manufacturers	2
Decorators (house)	T	Moulders	Õ.
Drivers	20	Merchants	10
Dressmakers and seamstresses	12	Managers	2
	ī	Mechanics	I
Dentists	- 1	Metal workers	T
	o	Massangara	-
Domestics	118	Messengers	3
Electrical workers	3	Meter workers	2

# TABLE No. 3 (Continued)—Deaths Due to Tuberculosis, Arranged According to Occupation, Year 1914.

Mill hands	I	Shirt factory hands	I
Mariners	3	Shoemakers	5
Ministers	2	Stone cutters	2
Ausicians	4	Steel workers	ī
Vurses	2	Ship carpenters	2
Office girls and boys	3	Storekeepers	ī
Dyster shuckers	4	Servants	8
Oilers (not specified)	4 I	Superintendents	1
Operators	2	Steamfitters	2
Painters	9	Stenographers	2
Plasterers	3	Stevedores	_
Packers	ა 2	School children	14
ackers	-	Soldiers	34
Paperhangers	5	Tobacco workers	I
Physicians	3	Tailors or tailoresses	16
Plumbers	2		
Post Office and Watchmen	2	Tanners	I
Post Office employes	2	Teamsters	4
City employes	I	Teachers	4
Produce dealers	I	Tinners	I
Porters	13	Tobacco workers	I
Printers and engravers	8	Telegraph operators	1
Religieuse	3	Telephone operators	2
Processors	1	Upholsterers	2
Riggers	I	Undertakers	I
Reporters	1	Varnishers	I
Roofers	I	Waiters	16
aloonkeepers	I	Waitresses	3
alesmen	15	Watchmakers	Ι
aleswomen	3	Weavers	I
eamen	13	Window cleaners	I
Solicitors	2	Woodworkers	I
Steam railway employes	14	Woodsawyers	2
Street railway employes	5	No occupation	225
Soc	ial C	ondition.	
Married		Divorced	
single	255	Unknown	
шие	SXX	UNKNOWN	9
		Chanoun	
VidowsVidowers	77 60	Total	·

#### REPORT OF THE

## TUBERCULOSIS (ALL FORMS).

# TABLE No. 4—Deaths According to Wards, Sex, Color and

		Jan	ıary.			Febr	uary.	
Wards.	White.		Colo	ored.	W	ite.	Colo	ored.
	M.	F.	M.	F.	M.	F.	M.	F.
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fourteenth Fifteenth Sixteenth Eighteenth Titteenth Titteenth Fourteenth Fifteenth Sixteenth Eighteenth Nineteenth Twentjeth Twentjeth Twentjeth Twenty-fourth Bay View, not in wards Sydenham Total	1 66 1 1 3 3 3 5 5 5 2 1 1 1 1 2 4 1 3 1 1 4 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		I 1 2 2 2 1 I	1 2 2 1 I I I I I I I I I I I I I I I I	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 1 1 3 3 2 2 4 4 3 3 2 2 2 2 1 1 2 2 2 2 1 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	2 1 1 1 1 2 2 1 1 1 1 1 2 2 1 1 1 1 1 1	1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Bay View, in wards	96	2 		2	8	ļ		5

#### HEALTH DEPARTMENT.

# TUBERCULOSIS (ALL FORMS).

Calendar Months, Not Including Non-Residents, Year 1914.

	Ma	rch.			Aŗ	oril.		May.				June.			
W	hite.	Colo	ored.	Wi	nite.	Cole	ored.	Wi	nite.	Cole	ored.	Wi	White.		ored.
М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	М.	F.
2 5 5 4 8 4 4 2 3 2 1 1 1 3 4 4 2  7 3 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	33 1 1 2 2 33 1 1 33 2 2 1 35 1	1 2 4 4 4 2 1 1 1 4 2 2 1 1 2 2 2 2 2 5 5	2 1 1 1 1 2 2 3 1 1 2 2 3 1 1 1 1 3 3 1 2 2 3 3 1 1 2 2 3 3 1 1 1 1	2 4 4 2 1 3 3 3 1 1 1 1 2 2 1 1 1 1 2 2 1 1 1 4 2 4 8	1 1 1 3 4 4 3 3 1 1 2 2 2 1 1 1 2 3 0 3 0 1 3 0 1 3 1 1 1 2 3 1 1 1 2 3 1 1 1 2 3 1 1 1 2 3 1 1 1 2 3 1 1 1 2 3 1 1 1 1 1 2 3 1 1 1 1 1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 3 1 3 1 2 1 1 5 5 2 1 24 6 6	<u> </u>	6 3 2 2 3 3 2 2 2 3 3 2 2 3 3 2 2 3 3 2 3 3 2 3 3 2 3 3 2 3 3 3 2 3 3 3 2 3 3 3 2 3 3 3 2 3 3 3 2 3 3 3 3 2 3	2 2 2 1 1 1 1 2 2 1 1	I I I I I I I I I I I I I I I	1 2 1 1 3 3 1 2 2 17 7 5 5	1 2 1 1 1 4 1 1 3 3 2 1 1 1 1 1 2 2 1 1 1 1 1 1 1 3 3 3 3 3	4 2 2 2 2 2 2 2 1	1 1 3 3 3 3 1 2 2 1 2 20	I 2 2 1 2 2 1 3 4 4 I I I I I I I I 2 2 1 2 1 4 4

# TUBERCULOSIS (ALL FORMS).

TABLE No. 4 (Continued)—Deaths According to Wards, Sex, Color

		Ju	ıly	1		Aug	gust			Septe	ember	•
Wards.	White.		Colo	Colored.		White.		ored.	White.		Colored	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.
First	4	3			I				2	3		
Second	3	3			ī	1	1	1	ī	2		
Third	J I I	2			2		١٠٠٠٠		4	ī		
Fourth	2	2	2		I		2	1	4 I	'	4	
Fifth		2	2	2	I		1	2	· 1	2		
Sixth	2		• • • •	1		1	1	ı		2		l
Seventh		3 I		1	3 I	_		3	•	I		
Eighth	3	5	2		2	3			4 I	l i	I	
Ninth		5	2	2		I			_	1 1		l
Tenth	3	١٠٠٠:	• • • •		I	2			I	٠٠٠:	I	
Eleventh	1	I			2		3		;••• <u>•</u>	3		1
			. I	I	I		-3				I	• • •
Twelfth			I		2	2	I	1			2	• • •
Thirteenth	2	2							3			
Fourteenth		I	4	I	2	2	2			• • • •	2	l
Fifteenth	2	2		2	I		2	I	1	I	I	!
Sixteenth	I	I		I	I		1		2		I	ļ
Seventeenth	I		2	3	I			I			I	1
Eighteenth	6		I	I	2		2	1		1	1	1
Nineteenth	I	2		I	1				. 3			1
Twentieth	I	I			1	1		1	I	1		١
Twenty-first	2	I	1			1	1	1	Ţ	1	I	١
Twenty-second	2		1		1		3	l	2	<b> </b> .	3	ľ
Twenty-third	, 2	[ ]		1	1	1	l	1	2	<i>.</i>		١
Twenty-fourth	3	1		l	2	۱	۱	۱		1	1	١
Bay View, not in		İ	1	i		İ	!	İ		1		ĺ
wards	ī	1				1	l	۱	2	۱		۱
Sydenham	١								i l			
-,	i											
Total	46	29	16	16	31	14	21	17	40	18	24	1
Bay View, in wards	13	I	7	2	7	ı	7	8	7	4	7	
Mt. Wilson, in wards Sanatoria, not in-	 				I							
cluded in above	ı	4			4	2			3	1		
tabic	•	4			4	_	• • • •		3			٠.

#### HEALTH DEPARTMENT.

# TUBERCULOSIS (ALL FORMS).

# and Calendar Months, Not Including Non-Residents, Year 1914.

	Octo	ber.		:	Nove	mber			Dece	mber			То	tal.	
Wh	ite.	Colo	ored.	Wł	iite.	Colo	ored.	Wh	ite.	Colc	ored.	Wh	iite.	Colored.	
М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.
6 2 3 3 4 1 1 1 3 1 1 3 2 28 28	3 I I I I I I I I I I I I I I I I I I I	1 2 2 2 1 1 4 4 1 1 2 2	3 3 3 1 1 1 2 2 2 1	2 1 1 2 2 1 1 4 2 2 1 1 2 2 3 3 3 3 2 2 2 1 1 4 4 1 4 4 1 4 4 2 1 1 4 4 1 4 4 1 4 1	2 I I I I I I I I I I I I I I I I I I I	1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	33	2 5 2 2 4 4 3 3 4 2 2 4 4 2 1 2 2 2 2 1 2 2 2 2 2 2 2 5 3 7 7	3 2 2 2 1 1 3 2 2 2 1 3 3 1 1 3 3 2 4 4	3 2 2 1 I I 6 1 1 2 2 1 2 1 4 4		30 34 26 17 12 40 28 32 34 17 16 13 21 20 25 22 28 12 26 15 	200 188 8 8 133 5 5 159 200 166 177 100 155 111 6 6 122 177 111 5 122 21 3 3	3	100 133 155 133 99 44 22 100 155 88 144 77 55 15 55 2218
	2					3			4	4		99 I			
9	6			5	3				I			58	25		

TABLE No. 5-Deaths by Age, Sex, Color and Average

TUBERCULOSIS.

Age at Death, and Social Condition, Year 1914.

Ma	rch.	A	oril.	М	ay.	Ju	ne.
White,	Colored.	White.	Colored.	White.	Colored.	White.	Colored.
M. F.	M. F.	M.   F.	M. F.	M. F.	M. F.	M. F.	M. F.
I I 2 I 2 4 IO 4 IO 3 8 3 9 1 2 2 1 2 2 2 2 2 I 1 73 35	I 2 I I I S 3 2 3 4 I 2 I	2 2 1 I I 3 2 3 8 7 2 2 1 3 3 4 3 6 5 1 2 I 1	6 7 1 5 4 3 2 1 3 2 2 1 1 1 1 1	1	3 1 3 3 3 3 3 4 5 4 I	I	2 2 3

TABLE No. 5 (Continued)—Deaths by Age, Sex, Color and

	July.				August.				September.			
Ages.	White.		Cole	Colored.		White.		Colored.		nite.	Colored.	
	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	М.	F.
Bet. 3 and 4 yrs Bet. 4 and 5 yrs Bet. 5 and 9 yrs Bet. 15 and 19 yrs Bet. 15 and 19 yrs Bet. 20 and 24 yrs Bet. 25 and 29 yrs Bet. 35 and 34 yrs Bet. 35 and 39 yrs Bet. 45 and 49 yrs Bet. 55 and 59 yrs Bet. 55 and 64 yrs Bet. 55 and 69 yrs Bet. 65 and 69 yrs	 1  2 3 3 8 4 11 6 1 4	I I I I I I I I I I I I I I I I I	 I I 3 2  I 3 2	3 3 1 4	2 1  1 3 1 1 5 5 2 1	1 2 1 3 3 2 3	 2 I  1		I I I I I I I I I I I I I I I I I	I I 3 3 3 3 3 1 I I I I I I I I I I I I	1 1 1 2 5 4 4 1 1 2 1	2 2 I I
Bet. 70 and 74 yrs Bet. 75 and 79 yrs Bet. 80 and 84 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs	I			<u></u>	  	  	21	  	40	18	24	 

TUBERCULOSIS.

Average Age at Death, and Social Condition, Year 1914.

	Octo	ber.			Nove	mbęr	·.		Dece	mber	•	Total.			
Wł	iite.	Colo	ored.	Wi	nite.	Cole	ored.	Wi	nite.	Cole	ored.	Wh	ite.	Colo	red.
М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	M.	F.	М.	F.	М.	F.
1 5 2 2 2 2 2 1 1 2 2 1	3 3 6 2 2 1 1 1 2 3 3 1 1 1	1 3 4 4 1 4 4	I 1 4 5 2 2 2 2 2	2 I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	II 22 44 II 12 22 II 21 II	3 2 2	I I I I I I I I I I I I I I I I I	4 6 4 4 4 6 6 2 2 1 I I 2 2	I 2 1 1 4 4 3 3 3 2 2 3 3	I I I I I I I I I I I I I I I I I I I	33 10 88 8 8 4 1 5 5 5 12 2 49 9 56 61 67 22 13 14 1 1 1	1 58 8 1 3 22 6 6 3 32 28 299 31 126 6 6 3 3	1 44 77 3 3 3 6 4 16 355 299 28 34 29 25 11 10 6 2 1 1	1 4 2 2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 2 2 3 3 3 5 3 7 7 1 9 2 1 1 2 2 3 3 3 5 2 2 1 2 2 2 1 2 2 2 2
<b>2</b> 8	24	18	19	43	20	17	11	53	32	21	16	523	318	255	218

TUBERCULOSIS.

TABLE No. 5 (Continued)—Average Age at Death.

	White.	Colored.	Total Deaths.
All ages	36.659	30.728	1,314 84
Five years and under	1.749 15.343	2.263 14.850	04 I40
Twenty years and over	41.047	36.520	1,090
Single	26.633	22.575	588
Married	40.782	36.560	
Widows	57 · 525	42.236	555 78 68
Widowers	54.217	50.241	68
Divorced	44.725	42.314	16
Unknown social condition	59.250	47.200	9



TUBERCULOSIS.

TABLE No 6—Deaths Each Month from Pulmonary Tuberculosis

	1900		1901		1902		1903		1904		1905	
Months.	w.	C.	w.	C.	W.	C.	w.	C.	w.	C.	w.	C.
January February March April May June July August September October November December	56 54 75 48 55 52 55 69 50 67 72 70	20 32 39 36 25 24 26 24 37 22 21 27	91 69 79 62 55 62 65 56 60 64	27 22 33 38 38 23 28 30 25 32	72 46 69 78 69 56 48 72 69 65 75 62	29 26 31 36 48 44 24 18 37 27 24 34	69 67 74 79 60 64 60 53 70 64 71 81	33 24 35 36 40 26 37 34 22 28 31	83 105 94 85 75 73 69 62 69 67 70	37 37 40 44 49 32 41 31 42 34 27 21	70 58 77 75 75 75 56 54 70 56 76	41 25 26 42 40 31 49 33 31 33 36 38
Total	723	333	781	<b>3</b> 57	<b>7</b> 81	378	811	375	914	435	811	425

TUBERCULOSIS.

According to Color, from 1900 to 1914, Inclusive.

19	06	19	107	19	800	19	09	19	10	19	11	19	12	19	13	19	14
W.	C.	w.	C.	w.	C.	w.	C.	w.	C.	w.	C.	w.	C.	w.	C.	w.	C.
63 97 84 72 68 64 62 48 62 83 84 93	27 22 41 32 36 28 40 34 25 42 40 48	105 98 106 72 76 75 64 76 73 65 81	47 40 62 41 43 39 43 37 28 32 26 51	101 70 95 83 80 72 85 80 51 67 68 74	39 37 40 56 34 33 52 36 34 28 32	78 68 98 94 76 60 57 88 65 73 72 80	45 39 51 33 35 42 41 46 46 27 35	72 74 98 81 73 60 73 64 77 63 77	39 41 39 48 46 34 44 41 40 36 38	81 77 88 82 76 71 59 56 61 62 72	33 51 45 37 57 52 37 42 29 40 35 40	88 91 87 85 72 58 75 57 51 63 79	32 36 46 44 47 45 47 25 30 56 33	77 75 83 74 85 72 51 64 72 59 61	58 41 52 41 59 44 52 39 24 33 36 29	69 89 108 72 66 59 75 45 58 52 63 85	42 44 45 47 42 41 32 38 40 37 28 37
880	415	951	489	926	453	909	491	885	480	846	498	866	480	837	508	841	473

Table No. 6-A—Number of Deaths From All Other Forms of Tuber-culosis, They Are Included in Table No. 6 Since 1907.

YEAR.	White.	Colored.
1907	116	68
1908	135	40
1909	133	52
1910	112	52
1911	140	78
1912	III	49
1913	112	74 78
1914	107	78

TABLE No. 7—Deaths Due to Tuberculosis of City Residents at Sabillasville, Year 1914.

		Wh	ite.		Age.	
Month.	Address.	Male.	Female,	Years.	Months.	Days.
January January January January January January January February April Apri	202 N. Pine St		I	37 19 338 52 47 29 60 1 25 43 29 17 47 28 47 30 21 49 8 48 26 53 27 45 31 32 44 42 38 56 44	3 	19 11 27 17 24 4 23 6 6 2 6 6 25 5 9 9

TABLE No. 7 (Continued)—Deaths Due to Tuberculosis of City Residents at Sabillasville, Year 1914.

		Wh	ite.		Age.	
Month.	Address.	Male.	Female,	Years.	Months.	Days.
October October October October October October October October October October October October October November	736 W. Saratoga St 541 Mission Court 122 S. Patterson Pk. Av. 616 Forrest St 816 E. Pratt St 104 S. Payson St City 1105 Bolton St 906 W. Fayette St 700 Druid Hill Ave 314 N. Greene St 1278 Battery Ave 2224 Cambridge St 3735 Morley St 1104 Riverside Ave 1210 Aisquith St 3401 Myrtle Place	I I I I I I I I I I I I I I I I I I I	1	62 33 27 41 34 19 58 29 37 37 36 15 21 42 49 22 25	2 4 11 8  3 8 4 	21 19 20 3
Total		42	13			

TABLE No. 8—Deaths Due to Tuberculosis of City Residents at Eudowood, Year 1914.

		Wh	ite.		Age.	
Month.	, Address.	Male.	Female.	Years.	Months.	Days.
February February February February March April April April June June July August August August September December	706 Mosher St	I I I I I I I I I I I I I I I I I I I	I 	22 55 32 37 28 40 17 42 41 22 41 29 25 38 34 52 31	1 8 9 2 10 2 3 3 6 3 8 7 9 6	22 4 10 7 16 11 25 3 24 2 1 10 20 21 5
Total		10	7			

TABLE No. 9—Deaths Due to Tuberculosis of City Residents at Jewish Home, Year 1914.

		Wh	ite.	Age.			
Монтн.	Address.	Male.	Female,	Years.	Months.	Days.	
January February May June August October October October October November November	309 N. Eden St 201 N. Eden St 127 S. Central Ave 507 S. Bond St 3 W. Lee St	I	I I I I	23 68 22 23 26 20 32 32 44 50	5 6	15	
Total		6	5				

# PNEUMONIA (LOBAR).

Table No. 1—Total Death Rate and Death Rates for White and Colored Population, Based on Census of 1910, from 1903 to 1914, Inclusive.

Year.	Estimated Population.*	Total Deaths.	Death Rate per 1,000 of Population.	White. No. of Deaths.	White. Death Rate per 1,000.	Colored. No. of Deaths.	Colored. Death Rate per 1,000.
1903 1904 1905 1906 1907 1908 1909 1910 1911 1912 1913	524,407 529,423 534,439 539,455 544,471 549,497 554,513 559,529 564,547 569,561 574,577 579,593	789 892 800 696 743 615 705 677 684 560 634 611	1.506 1.685 1.497 1.290 1.365 1.101 1.271 1.210 1.212 0.983 1.103	518 587 530 445 475 385 475 497 441 349 422 413	1.169 1.312 1.172 0.975 1.030 0.827 1.010 1.048 0.921 0.722 0.865 0.839	271 305 270 251 268 230 180 243 211 212	3.328 3.721 3.272 3.022 3.206 2.734 2.716 2.112 2.834 2.445 2.441 2.266

<sup>\*</sup>Corrected to July 1 of each year, according to census of 1910.

### TABLE No. 2-Deaths According to Wards,

•		Janu	ıary.			Febr	uary.	
Wards,	Wh	ite.	Cold	ored.	Wh	ite.	Colo	ored
	М.	F.	М.	F.	М.	<b>F</b> .	M.	F.
First Second Third Fourth Fourth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fourteenth Fifteenth Sixteenth Sixteenth Twenty-first Twenty-fourth Twenty-fourth Twenty-fourth Twenty-fourth	2 3 3 1 1 3 3 4 4 4 4 3 3 2 2 2 1 2 2 1 1 1 1	2 2 2 2 1 1 2 2 2 2 2 1 1 1 1 2 2 2 2			3 4 4 2 2 1 1 1 1 3 3 1 1 1 2 2 2 1 1 1 1 1 2 2 2 1 1 1 1	3 I I 2 2 I I I I I I I I I I I I I I I	1 1 1	
Bay View Sydenham Total	37	 	18	 	30	25	13	

Sex, Color and Calendar Months, Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ĵu	ne.	,
WI	nite.	Col	ored.	Wi	nite.	Col	ored.	Wi	nite.	Cole	ored.	Wi	iite.	Cold	ored.
M.	F.	M.	F.	M.	F.	М.	F.	М.	F.	M.	F.	M.	F.	М.	F.
3 1 1 1 2 2 3 3 1 1 1 5 5 1 2 2 1 1 1 2 2	3 2 1 1 1  3 1 2	I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	1 1 1 1 2 2 1 1 1 1 1 3 3 3	1	2 2 2 2 I .	I I I I I I I I I I I I I I I I I I I	3 1 1 1 2 2 1 1	I I I I I I I I I I I I I I I I I I I	I I I 2 2	I .	1 I	I	*1	
43	32	18	13	23	20	16	12	22	12	10	5	12	9	3	5

\*Chinese.

Continued on next page.

### TABLE No. 2 (Continued)—Deaths According to

		Ju	ly.			Aug	gust.		;	Septe	mber	•
Wards.	Wi	nite.	Col	ored.	W	nite.	Cole	ored.	W	nite.	Colo	ored
	<b>M</b> .	F.	M.	F.	М.	F.	М.	F.	M.	F.	М.	F.
First						,				т		
Second				,								
	<b></b>	i · · · ·									7	
ourth			1	1	1							
ifth	•••								• • • •		•	
ixth	•••								I			• • •
									1			• • •
eventh		I				<sub>.</sub>					1	• • •
ighth						-				I		•••
[inth									I			•••
enth										I	I	• • •
leventh					I							
welfth											I	
hirteenth				!					1			
ourteenth				ľ		ا ا			I			
ifteenth			۱							'		
ixteenth		1	۱	l		ا ا			T.		1	
eventeenth						I				!	i '	١
ighteenth		,							т		1	
Vineteenth												
wentieth									T			
wenty-first									-	Т		• • •
wenty-necond		1 1	:							-		
wenty-second	•••		1	1						-	• • • • •	• • •
wenty-third wenty-fourth						1						• • •
						• • • •	• • • •	• • • •				• • •
Bay View	• • •   • • • •			• • • •		• • • •			• • • •	• • • •	• • • •	
Sydenham	• • • • • • •		• • • •	• • • •	• • • •	• • • •	• • • •		$ \cdots  $	• • • •	• • • •	
M-4-1	.											
Total	6	2	2	6	4	7	2		9	6	6	

PNEUMONIA (LOBAR).

Wards, Sex, Color and Calendar Months, Year 1914.

	Octo	ber.			Nove	mber	•		Dece	mber.			To	tal.	
Wh	ite.	Colo	ored.	·Wi	nite.	Col	ored.	Wł	iite.	Cole	ored.	Wh	ite.	Cold	ored.
М.	F. (	М.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	<b>F.</b>	М.	F.
I I I I I I I I I I I I I I I I I I I	I I	I	    	3 3 3 3 I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	I 1 2	I 2 2 2 I I I I I 2 2 2 2 2 2 2 2 2 2 2	3  1  2 2 2  3  2 1		1 3 1	15 100 14 88 77 13 34 18 10 9 12 12 11 4 7 7 10 11 3 3 5 11 1	100 133 88 3 44 99 99 133 66 88 8 22 55 58 8 100 100 114 22 77 111	 6 8 5 1	I I 2 4
:.::															
  8	6	4	4		11	7	6	23	20	8	12	234	179	107	91

### TABLE No. 3—Deaths According to Age, Sex, Color and

		Janu	ıary.			Febr	uary.	
Ages.	Wi	nite.	Colo	red.	W	ite.	Colo	red.
	M.	F.	M.	F.	М.	F.	M.	F.
Under I month.  Bet. I and 3 mos.  Bet. 3 and 12 mos.  Bet. 3 and 2 yrs.  Bet. 2 and 3 yrs.  Bet. 2 and 5 yrs.  Bet. 4 and 5 yrs.  Bet. 5 and 9 yrs.  Bet. 15 and 19 yrs.  Bet. 15 and 19 yrs.  Bet. 20 and 24 yrs.  Bet. 25 and 29 yrs.  Bet. 30 and 34 yrs.  Bet. 35 and 39 yrs.  Bet. 40 and 44 yrs.  Bet. 45 and 49 yrs.  Bet. 50 and 54 yrs.  Bet. 55 and 59 yrs.  Bet. 55 and 69 yrs.  Bet. 60 and 64 yrs.  Bet. 60 and 64 yrs.  Bet. 75 and 79 yrs.  Bet. 75 and 79 yrs.  Bet. 80 and 84 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 90 and 94 yrs.  Bet. 90 and 94 yrs.	1 1 4 4	1 1 2 I 2 4 4	I 4	2 1 2 2 1 2 2 1 2 1 1 2 1	1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 3 3 3 1	3 I I	I I I I I I I I I I I I I I I I I I I	
Bet. 95 and 99 yrs	37	29	18	18	30	25	13	<u></u>

PNEUMONIA (LOBAR).

Calendar Months, Also Average Age at Death, Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ju	n <b>e</b> .	
Wi	nite.	Colo	ored.	WI	nite.	Colo	ored.	Wi	nite.	CoId	red.	Wi	nite.	Cold	red.
M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.
1 1 1 3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2 2 1 1 1 2 2 1 1 2 2 1 1 2 2 1 1	1 3 3 I 1 2 2 2 2 4 1	2	3 1 1 1 2 2 1 1 2 2 2	44	1 1 1 2 2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1	I I I I I I I I I I I I I I I I I I I	1 2 2 3 3 I 1 I 2 2 2 3 3 2 2		I I I I I I I I I I I I I I I I I I I	I	2 2 2 1 1 I 1 I 1 I I I I I I I I I	1 I I I I I I I I I I I I I I I I I I I	I	1
43	32	18	13	23	20	16	12	22	12	ю	5	12	9	3	5

Continued on next page.

PNEUMONIA (LOBAR).

TABLE No. 3 (Continued)—Deaths According to Age, Sex, Color

		Ju	ly.			Aug	gust.		,	Septe	mber	•
Ages.	WI	nite.	Colo	ored.	Wi	nite.	Colo	red.	Wi	nite.	Colo	red.
·	М.	F.	М.	F.	M.	F.	М.	F.	М.	F.	M.	F.
Under I month  Bet. I and 3 mos.  Bet. 3 and 12 mos.  Bet. 1 and 2 yrs.  Bet. 2 and 3 yrs.  Bet. 3 and 4 yrs.  Bet. 5 and 9 yrs.  Bet. 15 and 19 yrs.  Bet. 15 and 19 yrs.  Bet. 20 and 24 yrs.  Bet. 25 and 39 yrs.  Bet. 35 and 39 yrs.  Bet. 35 and 39 yrs.  Bet. 35 and 44 yrs.  Bet. 40 and 44 yrs.  Bet. 45 and 49 yrs.  Bet. 55 and 59 yrs.  Bet. 55 and 69 yrs.  Bet. 65 and 69 yrs.  Bet. 65 and 69 yrs.  Bet. 70 and 74 yrs.  Bet. 75 and 79 yrs.	I I	· · · · · · · · · · · · · · · · · · ·	I	I 2	I	I I I I I I I I	I		2	I I I I I I I I I I I I I I I I I I I	I	
Bet. 85 and 84 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs	I I											· · · · · · · · · · · · · · · · · · ·

PNEUMONIA (LOBAR).

and Calendar Months, Also Average Age at Death, Year 1914.

	Octo	ber.			Nove	November.				mber			То	tal.	
WI	nite.	Colo	ored.	White. Colored.		WI	nite.	Colo	ored. W		ite.	Colo	red.		
М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.
			<u>I</u>				1		I	<sub>I</sub>	1	2 5	4	2	2
I	I		<sub>I</sub>				I 2	<sub>I</sub>	2 I		I	10	9	7	Į I
											2 I	5	9	7 2	I
				I						1		5	ī	3	1
		1										1		2	1
• • • •												2	5	I	1
• • • •		• • • •	• • • •	• • • •				• • • •			• • • •	I	2		
• • • •			· I	• • • •		· · · · I			2	····I	1	5 2	8	3 6	
	1	т.		• • • •		1		1			3	7	5	5	3
								ī		I	I		3 8	7	
	<u> </u>				2	2				1	1	9 6	11	12	
								2				14	2	7	4
• • • •				2	I	1	• • • •	1	3			12	II	10	4
2		• • • •		3	I	I		2	• • • •	• • • •	• • • •	19	6	II	4
2			I	2	. I	:			2	· · · · I	· · · · I	19	9	- 8 - 6	
I		I		3	2	I	<u>ı</u>	4 2	2	1	1	26 15	17 15		
7				3	I		1	3				25	15	4 2	
	2	Ι		1		I	l	2	4	l		11	18	2	
					I	l	l	2	3			11	9	i	
					I	<b> </b>		2	I	[		5	8		
• • • •										[ · · · · ]			I		
• • • •		• • • •	• • • •	I				$ \cdots $		• • • •	• • • •	I	• • • •		• • •
8	- 6				11		6		20	8	12	22.4	170	107	
0	٥	4	4	17	11	7	0	23	20	o o	12	234	179	107	9

TABLE No. 3 (Continued)—Average Age at Death Due to Pneumonia, and Total.

	Average.	Total.
Of all deaths (white and colored)	42.760	611
colored)	1.351	117
inclusive (white and colored)	14.711	. 37
colored)	55.633	457

TABLE No. 4—Deaths According to Occupation, Year 1914, Also According to Social Condition.

		· · · · · · · · · · · · · · · · · · ·	
Artists and designers	I	Ironworkers	I
Accountants	ī	Jobbers	2
Agents (commission)	ī	Janitors	ī
Agents (insurance)	Ī	Jewelers (dealers)	· T
Agents (most actata)	_	Tabagaga (dealers)	_
Agents (real estate)	I	Laborers Laundresses	70
Bakers	I		IO
Barbers	I	Lawyers	I
Bartenders	· I	Leatherworkers	I
Boarding-house keepers	I	Liquor dealers	I
Butchers	2	Machinists	3
Bankers	I	Manufacturers	I
Builders and contractors	3	Moulders	3
Bricklayers	2	Merchants	7
Bookkeepers, clerks	5	Managers	ī
Bookbinders	·I	Mechanics	ī
Carpenters	7	Milliners	2
Charwomen	Ţ	Mariners	ī
Collectors	ī	Musicians	ī
Coachmen	I	Nurses	ī
Canmakers	_	Painters	2
	, I		_
Cigarmakers	3	Packers	I
Coppersmiths	I	Physicians	I
Cooks	8	Plumbers	· I
Compositor	I	Policemen and watchmen	8
Coopers	I	Produce dealers	I
Cutters	I	Porters	3
Cloth pressers	1	Printers and engravers	I
Drivers	4	Saloonkeepers	I
Dressmakers and seamstresses	I	Salesmen	3
Domestics	41	Scissors grinders	I
Electrical workers	3	Seamen	4
Engineers (marine)	I	Steam railway employees	5
Engineers (stationary engine)	2	Scowmen	Ĭ
Foremen	4	Street railway employees	2
Forewomen	Ī	Shirt factory hands	2
Factory hands	ī	Shoemakers	5
Farmers	4	Straw hat makers	I
Firemen (stationary engine).	2	Sextons	ī
Riremen (Fire Department).	I	Servants	
	-		3
Florists	I	Stevedores	10
Fruit dealers	I	Stewardesses	I
Government employees	I	School children	8
Housewives	79	Tailors or tailoresses	3
Hodcarriers	1	Teamsters	2
Hucksters	I	Teachers	2
Hostlers,	I	Tobacco workers	I

#### · REPORT OF THE

### PNEUMONIA (LOBAR).

# TABLE No. 4 (Continued)—Deaths According to Occupation, Year 1914, Also According to Social Condition.

Upholsterers	I I 2	Woodworkers	2 222
Socia	ıc	ondition.	
Unknown	3 3	Widowers	58 86
Married 22	21	70-4-1	

Table No. 1—Total Death Rate and Death Rates for White and Colored Population, Based on Census of 1910, from 1903 to 1914, Inclusive.

Year.	Estimated Population.*	Total Deaths.	Death Rate per 1,000 of Population.	White. No. of Deaths.	White. Death Rate per 1,000.	Colored. No. of Deaths.	Colored. Death Rate per 1,000.
1903	524,417 529,533 534,449 539,465 544,481 549,497 554,513 559,529 564,547 569,561 574,577 579,593	335 289 350 414 371 313 370 346 407 453 562 , 560	0.639 0.546 0.655 0.769 0.681 0.570 0.667 0.618 0.721 0.795 0.978	219 173 237 271 237 187 220 245 270 309 374 393	0.494 0.387 0.524 0.594 0.514 0.402 0.468 0.516 0.564 0.639 0.766 0.798	116 116 113 143 126 150 101 137 144 188	1.425 1.415 1.370 1.722 1.603 1.498 1.772 1.185 1.598 1.668 2.165 1.911

<sup>\*</sup>Corrected to July 1 of each year, according to census of 1910.

TABLE No. 2-Deaths Arranged by Sex, Color,

		Janu	ıary.			Febr	uary.	
Wards.	Wi	nit <b>e</b> .	Col	ored.	Wi	nite.	Col	ored.
	<b>M</b> .	F.	M.	F.	М.	F.	M.	F.
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fourteenth Fifteenth Sixteenth Sixteenth Sixteenth Sixteenth Eighteenth Twenty-first Twenty-frouth Twenty-fourth Twenty-fourth Twenty-fourth	3	2 I I I I I I I I I I I I I I I I I I I		I I I 2 2 2 1 I	2 1 1 2 2 1 1 1 1 2 2 1 1 1 1 1 4 4	1	2 I I I 3 3	I
Bay View								<u>.</u>
Total	20	21	7	10	25	29	15	9

BRONCHO-PNEUMONIA.

### Wards and Calendar Months, Year 1914.

•	Ma	rch.			Ap	ril.			M	ay.			Ju	ne.	
W	nite.	Col	ored.	WI	nite.	Col	ored.	W	nite.	Cole	ored.	WI	nite.	Cold	ored.
<b>M</b> .	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.
1 1 1 2 2 3 3 2 4 4 1 1 4 5 5 1 1 1 2 2 1 1 2 2	1 4 4 1 1 1 2 2 6 6 2 2 3 1 2 1 1 1 2 1 2 1 2 1	4 1 1 1 2 2 1 1 3 2 2 1 1	1 I	1 1 2 2	3 22 III 2 22 55 22 II 1	33 11 11	I 2 I 1 I I I I I I I I I I I I I	2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	I 2 I 2 I 2		2 1 4 1 1 1 1 1 1 1 2 2 1 1 1 1	I I I I I I I I I I I I I I I I I I I	1 I I I I I I I I I I I I I I I I I I I	I	I
35	34	17	6	19	23	10	9	25	19	4	15	6	8	3	4

Continued on next page.

TABLE No. 2 (Continued)—Deaths Arranged by Sex,

		Ju	ly.			Aug	gust.			Septe	mber	•
Wards.	Wi	nite.	Col	ored.	Wi	nite.	Colo	red.	WI	nite.	Cole	ored.
	М.	F.	M.	F.	М.	F.	М.	F.	M.	F.	M.	F.
First	1	т							I			
Third									I	, -		
FifthSixth				i	1	· · · · I						
Seventh						· · · · ɪ						
Ninth Tenth			1						 		 	
Eleventh	۱ ا							• • • •				
Thirteenth Fourteenth Fifteenth	· · · · I		 I		1			• • • •	 I	1		, .
Sixteenth		· · · · •			Ι.		I				I	
Eighteenth Nineteenth						I				· · · · I		
Twentieth Twenty-first				<sub>I</sub>					I		 I	
Twenty-second Twenty-third	1 2	· · · · I	· ·									 
Twenty-fourth Bay View						I	· · · · I				· · · · I	
Sydenham	i!								· · · · ·	 		
1 Otal	11	9	5	3	4	7	0		5	7	4	

BRONCHO-PNEUMONIA.

Color, Wards and Calendar Months, Year 1914.

	Octo	ober.		:	Nove	mber	•		Dece	mber	•	-	То	tal.	
Wi	nite.	Cold	ored.	Wi	nitę.	Cole	ored.	Wi	ite.	Col	ored.	Wh	ite.	Colo	ored.
М.	F.	М.	F.	<b>M</b> .	F.	М.	F.	М.	F.	M.	F.	М.	F.	М.	F.
I I I I I I I I I I I I I I I I I I I	2 2 I I I I I I I I I I I I I I I I	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 2 2	I I 2 2 1 1	I I I I I I I I I I I I I I I I I I I	2 I	I I I I I I I I I I I I I I I I I I I	1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 1 4 4 2 1 1 2 3 1 1 2 1 1 1 1 1 1 1 1 1	2 2 I		966 111 7 5 5 7 2 8 8 6 6 4 4 7 7 3 7 4 4 15 8 8 4	122 100 77 45 51 11 12 22 8 8 2 2 5 5 1 9 5 5	1 11 5 5 1 3 3 3 2 4 4 5 3 3 6 6 11 8 8 12 4 4 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	33 44 44 44 44 44 44 44 44 44 44 44 44 4
9	8	7	8	 	 17	8	<u>6</u>	17	23	 8	3	188	205	 —— 94	7:

# TABLE No. 3—Deaths According to Age, Sex,

		Janu	ıary.			Febr	uary.	
Ages.	Wł	ite.	Colo	red.	W	ite.	Colo	red.
• ,	M.	F.	М.	F.	M.	F.	М.	F.
Under I month	2				2	5	2	1
Bet. I and 3 mos	ĩ	3	ı	I	3	I		l <sup>-</sup>
Bet. 3 and 12 mos.	4	I		3	9	10		1
Bet. I and 2 yrs	6	2		3	5	2		î
Bet. 2 and 3 yrs	·	_	-	. ī	J	ī		1
Bet. 3 and 4 yrs		ī		1		Ť		
Bet. 4 and 5 yrs			1			•		, ,
Bet. 5 and 9 yrs	т		1			I	7	
Bet. 10 and 14 yrs		_	1				1	
Bet. 15 and 19 yrs			::::			ī		
Bet. 20 and 24 yrs			::::					
Bet. 25 and 29 yrs	т		l	1	Ι			
Bet. 30 and 34 yrs								
Bet. 35 and 39 yrs	т.		1				1	
Bet. 40 and 44 yrs			1					,
Bet. 45 and 49 yrs	т	-	1	1				
Bet, 50 and 54 yrs			ı	::::	т			
Bet. 55 and 50 yrs			Ī			3		
Bet. 60 and 64 yrs	· · · · I	}	1 -		і	1	3	
Bet. 65 and 69 yrs	ī	ı	1			Ť		
Bet. 70 and 74 yrs	Ţ	5 5			····	•		l
Bet. 75 and 79 yrs		1		I	ī	I		l
Bet. 80 and 84 yrs		•						
Bet. 85 and 89 yrs		2				т	1	• • •
Bet. 90 and 94 yrs.			::::			٠.		
Bet. 95 and 99 yrs				1		• • • •	1	١ '
Det. 95 and 99 yrs	• • • •			• • • •	• • • •	• • • •	····	
Total	20	21	7	10	25	29	15	
± Otal	20	21	/	10	25	29	1 -3	,

BRONCHO-PNEUMONIA.

Color and Calendar Months, Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ju	ne.	
Wi	nite.	Colo	ored.	Wi	nite,	Colo	red.	Wi	nite.	Colo	ored.	Wi	nite.	Colo	red.
М.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	М.	F.
2 2 2 9 5 3 3 I I I I I I I I I I I I I I I	1 4 4 9 4 1 1 2 2 1 1 2 2 7 7 2 2	2 3	I	2 II	II 33 77 22 II II II 12 2 II 2 1 II	1 2 3 3 1 1	4 3	44 77 44 11 II II II II II II II II II II II I	2 2 2 6 6 3 1 1	3	I 2 2 5 2 2 I .	3 1	I I I I I I I I I I I I I I I I I I I	I 2	I
35	34	17	6	19	23	10	9	25	19	4	15	6	8	3	4

Continued on next page.

TABLE No. 3 (Continued)—Deaths According to Age,

		Ju	ly.			Aug	rust.		\$	Septe	mber	•
Ages.	W	nite.	Colo	ored.	Wi	nite.	Colore	L ,	Wh	ite.	Colo	red.
•	M.	F.	M.	F.	M.	F.	M. F	. N	A.	F.	М.	F.
Under I month Bet. I and 3 mos Bet. 3 and I2 mos Bet. 1 and 2 yrs Bet. 2 and 3 yrs Bet. 2 and 4 yrs Bet. 5 and 9 yrs Bet. 15 and 14 yrs Bet. 15 and 19 yrs Bet. 20 and 24 yrs Bet. 25 and 29 yrs Bet. 25 and 29 yrs Bet. 35 and 34 yrs Bet. 35 and 39 yrs Bet. 40 and 44 yrs Bet. 45 and 49 yrs Bet. 55 and 59 yrs Bet. 55 and 59 yrs Bet. 55 and 69 yrs Bet. 65 and 69 yrs Bet. 75 and 79 yrs Bet. 75 and 79 yrs Bet. 75 and 79 yrs Bet. 75 and 79 yrs Bet. 80 and 84 yrs Bet. 85 and 89 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs	2	2 2 1 1 1 · · · · · · · · · · · · · · ·	I	1 I	I	2	3 1      		I I	3 1	I 2	
Bet. 95 and 99 yrs Total				····			<u> </u>			7	4	

Sex, Color and Calendar Months, Year 1914.

`	Octo	ber.		:	Nove	mber	:.		Dece	mber	•		To	tal.	
Wi	nite.	Colo	ored.	Wi	nite. '	Cole	ored.	W	hite.	Colo	ored.	Wi	nite.	Colo	red.
М.	F.	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.
3 1 1 1	1 4 4 · · · · · · · · · · · · · · · · ·	1	2 2 1 1 I	1 2 2 1 1 1 1 2 1 2 1	1 2 2 3 3 1 1 1 1 1 1 2 2 2 2 1 1	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	1 I	2 4 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 4 4 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	12 17 466 368 1 2 4 4	12 17 500 222 7 7 4 1 6 6 2 3 3 3 8 8 10 11 23 9 4 4 9 9 2	20 3 4 5	3 7 7 15 16 6 6 2 3 3 1 1 1 2 2 1 1 2 2 2 1 1 1
9	8	7	8	12	17	8	6	17	23	8	3	188	205	94	73

### TABLE No. 4—Deaths According to Occupations and Social Condition, Year 1914.

Butchers	1	Machinists	I
Bricklayers	1	Manufacturers	I
Bookkeepers, clerks	4	Merchants	2
Broommakers	I	Painters	2
Carpenters	I	Plasterers	1
Cementworkers	1	Paperhangers	Ţ
Cigarmakers	1	Plumbers	2
Cooks	. 2	Policemen and watchmen	I
Drivers	2	Religieuse	I
Dressmakers and seamstresses	1	Restaurant keepers	2
Domestics	14	Ropemakers	1
Fruit dealers	1	Steam railway employees	I
Grocers	2	Shoemakers	I
Glassblowers	2	Storekeepers	1
Hairdressers	1	Stevedores	I
Housewives	38	School children	8
Hucksters	I	Tailors or tailoresses	1
Hostlers	2	Tanners	I
Janitors	2	Waiters	I
Jewelers (dealers)	I	Woodworkers	I
Laborers	20	No occupation	426
Launderers or laundresses	4		

### Social Condition.

Widows       54         Widowers       28         Total       560
 10tai



# TABLE No. 1-Showing Deaths According to Color,

		Janu	агу.			Febr	uary.	
Wards.	Wh	it <b>e.</b>	Colo	ored.	Wh	ite.	Cole	ored.
	M.	F.	М.	F.	M.	F.	M.	F.
First					3	, ,		
Second		п			I			
Fifth				• • • •				
Seventh	I	<sub>I</sub>				<u>I</u>		
Ninth Tenth		 		I	I			[ 
Eleventh	' I	I				I		
Thirteenth Fourteenth Fifteenth		 			I			
Sixteenth								
Eighteenth								 
Twentieth Twenty-first			]····					ļ···
Twenty-second	I					<u>.</u>		:::
Twenty-fourth	· · · · ·							
Total	4	ļ <del></del>	4	4				-

Sex, Wards and Calendar Months, Year 1914.

M	arch.			Ap	ril.			M	ay.			Jι	ıne.	
White.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	it <b>e</b> .	Cole	ored.	Wh	it <b>e.</b>	Cold	ored.
M. F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.
1				I I I I I I I I I I I I I I I I I I I			I		I I	 	I		 	· · · · · · · · · · · · · · · · · · ·
9	7 3		6	8	3	<u> </u>	5	2	4	I	<u>,</u>	2	2	1

Continued on next page.

### TABLE No. 1 (Continued)-Showing Deaths According to

		Ju	ly.			Aug	ust.		;	Septe	mber	•
Wards.	Wh	ite.	Col	ored.	Wh	it <b>e.</b>	Colo	ored.	Wh	ite.	Cole	ored
	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.
First		ļ 									 	 I
Second				1								
Third						ī			• • • •	,		1
Fourth					• • • • •				• • • • •			١٠٠٠
Fifth					••••	• • • •		••••	• • • •			١
Sixth	•• ••••				;	. 1	• • • • •	• • • •	• • • •	:		<b>  · · ·</b>
	•••	I	• • • •		••••	, -				I		i
Seventh	•••••	• • • •	• • • •			• • • •	• • • •	• • • •	• • • •	• • • •	• • • •	• • •
Eighth	•• •••	• • • •	• • • •	• • • •	• • • •	• • • •	• • • •	• • • •	• • • •	• • • •		•••
Ninth	••   • • • •	• • • •	• • • •	• • • •	• • • •	• • • •		• • • •			I	
renth	$\cdot \cdot  \cdot \cdot \cdot \cdot $						]				• • • •	• • •
Eleventh							]				• • • •	
[welfth			I	] '								
I hirteenth							1		]			
Fourteenth						1						
	••[•••]		1									
Sixteenth										1	'	
Seventeenth							I	!			I	
Eighteenth			1	[		1						l
Vineteenth			2	l		1	1		1		1	
I'wentieth											T	
I'wenty-first									1			
wenty-second								I				
wenty-third								-				•••
wenty-fourth					2			• • • • •			••••	•••
Bav View				l	_			• • • •		١٠٠٠٠		• • •
Sydenham				,				••••		••••		• • •
yucillaili	••	• • • •	• • • •		••••	• • • • •	••••	••••	• • • • •	••••	• • • • •	• • •
Total												
TO(gl	. 2	2	5		2	2	2	I	• • • •	2	3	

Color, Sex, Wards and Calendar Months, Year 1914.

	Octo	ber.			Nove	mber	•	i	Dece	mber	•		То	tal.	
Wh	it <b>e</b> .	Colo	ored.	Wh	ite.	Col	ored.	Wh	it <b>e.</b>	Col	ored.	Wh	it <b>e</b> .	Colo	ored.
М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.
1	I I I I I I I I I I I I I I I I I I I		· · · · · · · · · · · · · · · · · · ·	I I I I I I I I I I I I I I I I I I I	1 I I I			2	I	· · · · · · · · · · · · · · · · · · ·		7 44 3 3 1 3 3 4 3 2 2 2 1 2 2 2 1 4 1 1 2 3 3	3 1 4 4	2 1 1 1 4 4 2 2 4 1 3 3 1 2 2	22 I
2	8		1	8	8			3	5	I		54	58	28	12

### TABLE No. 2-Showing Deaths According to Age,

		Jan	ary.			Febr	пагу.	
Ages.	WI	nite.	Colo	red	W	nite.	Cole	red
	<b>M</b> .	F.	M.	F.	M.	F.	M.	F.
Under I month			1	٠				ļ <b>.</b>
Bet. I and 3 mos				I 2	1		1 7	· · · · ·
Bet. 3 and 12 mos	1	,	:		ے 			۱ ٔ
Bet. 1 and 2 yrs Bet. 2 and 3 yrs		i			• • • •			!
Bet. 3 and 4 yrs					••••	l		l
Bet. 4 and 5 yrs								
Bet. 5 and 0 yrs								
Bet. 10 and 14 yrs								
Bet. 15 and 10 yrs			I			l		1
Bet. 20 and 24 yrs	!	١	1				1 1	Í
Bet. 25 and 29 yrs								l
Bet. 30 and 34 yrs			[ <u> </u>				İ	l <b>.</b> .
Bet. 35 and 39 yrs		1	Ì <sup>i</sup>				l l	<i>.</i>
Bet. 40 and 44 yrs		[	[					<b> </b>
Bet. 45 and 49 yrs			l				<b> </b>	
Bet. 50 and 54 yrs			l	1		1	'	۱
Bet. 55 and 59 yrs			1		I	١	<i></i> '	۱
Bet. 60 and 64 yrs			[ <u> </u>		1		1	ļ
Bet. 65 and 69 yrs		l	<b> </b>		I		l	ļ
Bet. 70 and 74 yrs			١ ا		1	! !	1	l <b>.</b>
Ret 75 and 70 yrs	:	1	<b> </b>		3	İ		
Bet. 80 and 84 yrs	:	2	<b> </b>				<b> </b>	
Bet. 85 and 89 yrs			j		·	ļ		
Bet. 90 and 94 yrs						1	¦	<u>.</u>
Bet. 95 and 99 yrs			]]				J	• • • •
<b>.</b>		<del> </del>	<u> </u>	<del></del>				
Total	4	7	4	4	12	5	1	2

Color, Sex and Calendar Months, Year 1914.

	Ma	rch.			Aı	oril.			, M	ay.			Jı	une.	
Whit	te.	Cole	ored.	WI	nite.	Cole	ored.	WI	nite.	Cole	ored.	WI	nite.	Cold	ored
м.	F.	M.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.
I	I			I I	I	I			[	1		ŀ	I	I	· · · · · · · · · · · · · · · · · · ·
9	7	3		6	8	3 	I	5	2	4	I	I	2	2	I

Continued on next page.

### TABLE No. 2 (Continued)—Showing Deaths According

		Ju	ly.			Aug	gust.		;	Septe	mber	•
Ages.	W	nite.	Colo	ored.	Wł	ite.	Colo	ored.	Wi	iite.	Colo	ored
	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.
Under 1 month Bet. 1 and 3 mos			1				• • • •					
	• • • •	••••	• • • •			1		• • • •	• • • •	····	1	• • • •
Bet. 3 and 12 mos Bet. 1 and 2 yrs	• • • •	1 1			1	• • • •			• • • •		1	
Bet. 2 and 3 yrs	• • • •		1	••••	• • • • •	• • • •		1	• • • •	• • • •		
Bet. 3 and 4 yrs												
Bet. 4 and 5 yrs												
Bet. 5 and 9 yrs												
Bet. 10 and 14 yrs												
Bet. 15 and 19 yrs.												
Bet. 20 and 24 yrs.	••••								• • • •			l · · · ·
Bet. 25 and 29 yrs	 i								• • • •			
Bet. 30 and 34 yrs												
Bet. 35 and 39 yrs			T				T		• • • •			
Bet. 40 and 44 yrs												
Bet. 45 and 49 yrs		1									T	۱ <u>`</u>
Ret to and to vrs		1		1		ΙT	i	l <b>.</b>				
Ret se and so ves	, , ,									T		
Bet. 55 and 59 yrs Bet. 60 and 64 yrs	ļ <del>.</del>	1					т			ĺ	1	1
Bet. 65 and 69 yrs												l
Bet. 70 and 74 yrs		1	1							1		l
Ret 75 and 70 vrc	l	1			т	ı	1			i	1 1	
Bet. 80 and 84 vrs	7	l	١	١			l	l		l		l
Bet. 85 and 80 yrs.	l	l	1	1			l	l		l	l'	I
Bet. 90 and 94 vrs	l	l	l	l			<b></b> '	l		l	[]	l
Bet. 80 and 84 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs		J									<b> </b>	
		[						<b> </b>				
Total	2	2	l 5		2	2	2	1		2	3	

to Age, Color, Sex and Calendar Months, Year 1914.

	Octo	obe <b>r.</b>	•		Nove	mber	ī.		Dece	mber	•		To	tal.	
Wi	nite.	Cole	ored.	Wi	nit <b>e</b> .	Cole	ored.	WI	nite.	Cole	ored.	Wi	nite.	Cold	ored.
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	М.	F.
· · · · · · · · · · · · · · · · · · ·	- 2 I				33			I	I I	I		3 7 6 2 1 · · · · · · · · · · · · · · · · · ·	7 3 3 2 1 2 2 1 1 1 1 2 2 2 1 3 7 4 4 5 3 3 3		1 1 3 3 1 1 1 1 2 1 1 1 1
									1				2		
<u>`</u>	8		1	8	8			3	5	1		54	<u></u>	28	12

#### ALIMENTARY CANAL.

TABLE No. 1-Showing Deaths by

	Und	ler 1	Mo	nth.	1 a		ween Mor		3 aı		ween Mo	
Months.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	or <b>ed.</b>
	М.	F.	М.	F.	М.	F.	м.	F.	М.	F.	М.	F.
January February March April May June July August September October November December	3  1 2 5 1 3	2	i	1 1	1 2 1 1 1 11 11 6 5 6 5	1 3  1 4 11 9 7 4 5	1 6 2 2	3 2 2 1 1	1 1 2 2 2 7 48 40 19 11 7	14	2 2 2 11 8 6 5	۱
Total	15	12	1	2	51	47	16	10	141	126	37	28

ALIMENTARY CANAL.

Months, Age, Color and Sex, Year 1914.

		ween 2 Ye		2 8		ween B Ye		3 a		ween 4 Ye		4 8		ween 5 Ye			То	tal.		al.
Wh	ite.	Cold	ored.	Wb	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	W	ite.	Col	ored.	d Total.
М.	F.	M.	F.	М.	F.	м.	F.	М.	F.	M,	F.	М.	F.	M.	F.	М.	F.	м.	F.	Grand
1 2 1 1 1  9 10 4 3 7	1 1 2 1 2 9 8 8 2 1	2 1 1	 1  1 1 1	1  1 2 1 2	1  1 1 	i	1	i	  i 1				i i		1	4 3 8 4 5 12 76 63 34 19 20 6	63 56 55 13 62 47 32 24 21 4	32 37 12 111 7 4 2	 2  1 12 11 10 5 3 3	10 6 13 15 12 29 167 133 87 55 48 15
39	35	6	5	7	4	1	1	1	2				2		1	254	228	61	47	590

#### ALIMENTARY CANAL.

TABLE No. 2-Showing Deaths by

	Une	der 1	l Mo	nth.	1 a:		weer Mor	ths.	3 ar		weer 2 Mo	n nths
Wards.	Wh	ite.	Col	ored.	Wh	ite.	Cold	ored.	wh	ite.	Col	ored.
	М.	F.	М.	F.	м.	F.	м.	F.	М.	F.	М.	F.
First . Second	 1 		i i	· · · · · · · · · · · · · · · · · · ·	63 31 12 11 22 22 22 23 11 22 23 12 23 13	44 82 11  12 11 22 11 11 11 12  44 44 2		1  1  4  1	177 222 6 1 1 5 6 6 7 7 3 3 6 2 3 3 3 4 4 1 7 7 7 4 4 7 9 4 4 1 4 1 4	19 17 19 11 13 22 12 12 62 22  7 8 8 11 13	1 2 2	10
Total	15	12	1	2	51	47	16	10	141	126	37	28

ALIMENTARY CANAL.

Wards, Age, Color and Sea, Year 1914.

		ween 2 Ye		2 ε		ween BYe		3 8		ween 4 Ye		4 8		ween 5 Ye			То	tal.		tal.
Wh	ite.	Col	ored.	Wh	ite.	Col	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Grand Total.
м.	F.	м.	F.	M.	F.	м.	F.	М.	F.	м.	F.	M.	F.	м.	F.	М.	F.	М.	F.	Grai
5522111122133522432	6 2 4 4 2 1 1 1 1 1 1 2 1 2 2 2 5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	i i i i i i i i i i i i i i i i i i i	1 1 1	1	1 	1	i					1		1 	29 34 9 5 1 1 5 1 2 6 13 13 9 10 6 13 11 9 2 2 4 3 9 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	822 306 166 9 4 22 4 22 5 12 13 9 14 11 11 21	143262121462853533	11  31 11  14 11 11 11 15	
39	85	8	5	7	4	1	1	1	2				2	ļ	1	254	228	61	47	59

#### INANITION.

TABLE No. 1-Showing Deaths by

	Und	ier 1	Mo.	nth.	1 a		ween Mon		3 an		ween 2 Mo	nths.
Months.	Wh	ite.	Colo	red.	Wb	ite.	Cold	red.	Wh	ite.	Cold	ored.
	М.	F.	м.	F.	M.	F.	м.	F.	м.	F.	м.	F.
January February March April May June July August September October November December	3 1 1 4 2	1 3  1 2 1	1 	2	1 1 1  1 	i	· i	i	1 1  i	2 	i	
Total	14	10	4	4	5	1	2	2	4	3	1	1

INANITION.

Months, Age, Color and Sex, Year 1914.

1 8		weer 2 Ye		2 :		ween 3 Ye		3 8		ween 4 Ye		4 8		ween 5 Ye		-	То	tal.		Total.
Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	oređ.	Wh	ite.	Cole	ored.	Wi	ite.	Col	ored.	
М.	F.	м.	F.	M.	F.	м.	F.	М.	F.	м.	F.	M.	F.	М.	F.	M.	F.	м.	F.	Grand
		···	i													2 4 2 2 1 2 2 4 · · · 3 1 · · ·	3 :33 11 : :	2 1 2 1 1	2  1 2 1  1 1	
	•	1	1									•••				23	14	8	8	5

## INANITION.

TABLE No. 2-Showing Deaths by

	Und	ler 1	Mo	nth.	1 a		ween Mor		3 ar		ween Mo	
WARDS.	Wh	ite.	Col	o <b>red</b> .	Wb	ite.	Col	ored.	Wh	ite.	Col	ored.
	М.	F.	М.	F.	М.	F.	м.	F.	м.	F.	М.	F.
First Second. Third. Fourth Fifth Sixth Seventh Eighth Ninth Tenth. Eleventh Twelfth. Thirteenth Fourteenth Fifteenth Sixteenth Sixteenth Sixteenth Eighteenth Tifteenth Twenty-tiftenth Twenty-third Twenty-third Twenty-fourth	4 1 1  1 2  1 1	2 2 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	'i ::::::::::::::::::::::::::::::::::::	i i i i i i i i i i i i i i i i i i i	1 1 1 1 	i	i	1	1 1 1 1 1 	1 1 1 	1	1
Total	14	10	4	4	5	1	2	2	4	3	1	1

INANITION.

Wards, Age, Color and Sex, Year 1914.

1 8		ween 2 Ye		2 8		ween 3 Ye		8 8		ween 4 Ye		4 ε		ween 5 Ye			То	tal.		E E
Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	oređ.	Wh	ite.	Cole	ored.	d Total.
М.	F.	М.	F.	м.	F.	м.	F.	М.	F.	м.	F.	M.	F.	м.	F.	М.	F.	м.	F.	Grand
• • • •																4 2	2			. •
	• • •									:::	::::			:::	::::			···ż	i	
	• • •				:::				; ; ;							3			1	
• • •	• • •				:::	:::		:::	:::	:::		:::	:::	:::		1 2 1		:::		1
			1			:::		:::	:::	:::		:::	:::		; :::	 1 2	 1			
		··i		:::		:::			:::	:::			:::				• • •	1 1		
	• • • •															··i	1 2	1 1	1 1	
	• • • •			:::						:::						1		· · · ·	····i	] :
	:::								:::	:::	::::				:	:::	• • •		i	] 
		1					$\vdash$		<u>                                       </u>	<u>                                      </u>	-					23	14	8	8	53

### MARASMUS.

TABLE No. 1-Showing Deaths by

	Unc	ier 1	Mo	nth.			ween Mor	iths.	3 ar		ween Mo	nths.
MONTHS.	Wh	ite.	Cole	ored.	Wh	ite.	Col	ored.	Wh	ite.	Col	ored.
	M.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M.	F.
January February March April May June July August September October November December	4 1 2 1 1	1 1 			1  2  1 4 1	2  1 1  2 4 1 		···i	2 1 1 1 4 . 3 1 3 2 1 2	 1 1 1  1 2 1 1 1	1 1 1 2 2 1	1
Total	10	6	1	••••	9	12		1	21	10	8	1

MARASMUS.

## Months, Age, Color and Sex, Year 1914.

1 8	Bet and	ween 2 Ye		2 ε		ween 3 Ye		3 a		ween 4 Ye		4 a		ween 5 Ye			То	tal.		Total.
Wh	ite.	Cole	or <b>ed</b> .	Wh	ite.	Cole	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Cole	oređ.	Wh	ite.	Col	ored.	
М.	F.	м.	F.	M.	F.	М.	F.	М.	F.	М.	F.	м.	F.	м.	F.	М.	F.	М.	F.	Grand
···i	1 i		1				1									22 17 55 38 4 13	4 1 2 3 1 1 3 9 2 1 1 2	1 1 2 2 1 1	1  2 1 	7 3 3 11 8 8 7 19 8 8 3 6
1	2		2				1									41	30	9	5	85

## MARASMUS.

TABLE No. 2-Showing Deaths by

	Und	ler 1	Mo	nth.			ween Moi	ths.	3 an		ween Mo	
WARDS.	Wh	ite.	Col	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Colo	ored.
	м.	F.	М.	F.	м.	r.	М.	F.	м.	F.	м.	F.
First	1 1  1 1 1 1	1	1		1 1 2 2	111111111111111111111111111111111111111		1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11	3	
Total	10	6	1		9	12		1	21	10	8	

MARASMUS.

Wards, Age, Color and Sex, Year 1914.

1 8		weer 2 Ye		2 8		ween 3 Ye		3 (	Bet and	weer 4 Ye		4 8		ween 5 Ye			To	tal.		al.
Wh	ite.	Cole	ored.	Wh	ite.	Col	ored.	W	ite.	Col	ored.	Wh	ite.	Cole	oređ.	Wi	ite.	Col	ored.	d Total.
М.	F.	м.	F.	M.	F.	М.	F.	М.	F.	M.	F.	М.	F.	М.	F.	M.	F.	М.	F.	Grand
· · · · · · · · · · · · · · · · · · ·	1		1 1 1				i									1 1 2 2	1 1 2 1 1 2 1 1 2 1 3 8	3  1	1 1 1 	11 22 44 23 31 31 20 31 20 35 52 44 35
1	2		2				1	•••								41	30	9	5	85



### CANCER.

TABLE No. 1—Total Deaths (Residents only) and Death Rates for White and Colored Population, Based on Census of 1910, from 1903 to 1914, Inclusive.

Year.	Estimated Population.*	Total Deaths.	Death Rate ner 1,000 of Population.	White. No. of Deaths.	White. Death Rate per 1,000.	Colored. No. of Deaths.	Colored. Death Rate per 1,000.
1903	524,407 529,423 534,439 539,455 544,471 549,497 554,513 559,529 564,547 569,561 574,577 579,593	311 375 376 392 400 414 403 472 465 484 602 518	0.593 0.708 0.704 0.727 0.735 0.727 0.844 0.824 0.849 1.047 0.893	285 331 323 341 347 355 351 420 410 425 514	0.621 0.739 0.715 0.725 0.753 0.763 0.747 0.885 0.856 0.879 1.053 0.889	26 44 57 51 53 59 52 52 55 59 88	0.319 0.537 0.690 0.614 0.646 0.701 0.614 0.660 0.641 0.683 1.013

<sup>\*</sup>Corrected to July 1 of each year, according to census of 1910.

CANCER.

Table No. 2—Average Age at Death in Year 1914—Average at Death both White and Colored.

		White.			Colored.		To	Total.	Grand
	Male.	Female.	Total.	Male.	Male. Female.	Total.	Male.	Female.	Total.
Number of deaths	163	275	438	20	8	&	183	335	518
Combined number of years. 9,291.23 17,004.72 26,295.95 1,058.74 3,051.90	9,291.23	17,004.72	26,295.95	1,058.74	3,051.90	4,110.64	10,349.97	4,110.64 10,349.97 20,056.62	30,406.59
Average age in years	57.001	61.835	60.036	52.937	52.937 50.865	51.383	56.556	59.870	58.699
					_				

CANCER.

Table No. 3—Deaths Due to Cancer of the Seven Organs Most Frequently Involved Primarily, Giving the Average Age at Death, Year 1914.

Male. Female.  Male. Female.  16 50 48 44 48 44 6 1	NUMBER O	NUMBER OF DEATHS.		Av	Average Age at Death.	e at De	ATE.	to e -loo ined.
Male. Female. Male.  16 50 I 48 44 IO 55 55 6 I 2	White.	Colored.		Wh	White,	Col	Colored.	ige age ite and d combi
16 50 I 48 44 10 55 6 I 2	Female.			Male.	Female.	Male.	Female	579VA idw 5910
48 44 10 55 55 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	91	1 S	72	59.236	59.236 60.355	55.000	51.400	59.410
55	84		108	57.302	62.251	53.733	56.346	58.934
6 1 5		24	79		53.605		44.649	50.884
y	:		25		57.760		51.787	56.646
	ı 9	2 I	OI	61.555	49.160	46.705 64.580	64.580	57.648
	0I 6	I	 50	59.944	61.022		52.000	60.086
Intestines 7	11 2	-		51.008		58.696	56.000	55.760

TABLE No. 2-Showing Deaths by Age,

		Jan	пагу.			Febr	uary.	•
Ages.	Wh	ite.	Colo	ored.	Wi	ite.	Cold	ored.
	М.	F.	M.	F.	M.	F.	М.	F.
Under I month.  Bet. I and 3 mos.  Bet. 3 and 12 mos.  Bet. 1 and 2 yrs.  Bet. 2 and 3 yrs.  Bet. 2 and 4 yrs.  Bet. 4 and 5 yrs.  Bet. 5 and 9 yrs.  Bet. 15 and 19 yrs.  Bet. 20 and 24 yrs.  Bet. 25 and 20 yrs.  Bet. 25 and 20 yrs.  Bet. 30 and 34 yrs.  Bet. 35 and 39 yrs.  Bet. 40 and 44 yrs.  Bet. 45 and 49 yrs.  Bet. 45 and 49 yrs.  Bet. 55 and 59 yrs.  Bet. 55 and 59 yrs.  Bet. 65 and 69 yrs.  Bet. 70 and 74 yrs.  Bet. 75 and 79 yrs.  Bet. 75 and 79 yrs.  Bet. 85 and 84 yrs.  Bet. 85 and 89 yrs.  Bet. 85 and 89 yrs.  Bet. 90 and 94 yrs.  Bet. 95 and 99 yrs.  Bet. 95 and 99 yrs.  Bet. 95 and 99 yrs.  Bet. 95 and 99 yrs.  Bet. 95 and 99 yrs.	I	  I	I	I	1 1 1 3 3 1 4 4 3 3 3 3 3	1 1 2 2 5 3 3 4 4 2 3 3 3 2 2	3 1 1 1 1 1	33 I
Total	34	<b>3</b> 6	6	6	18	33	9	8

BRIGHT'S DISEASE.

Months, Color and Sex, Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ju	ne.	
Wł	nite.	Colo	or <b>e</b> d.	Wi	nite.	Cole	ored.	Wi	ite.	Colo	ored.	Wł	ite.	Colo	red.
M.	F.	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
I I I 3 3 2 2 4 3 3 5 5 5 2 2 I I	55 33 44 33 37 7 22	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	22 I I I I I I I I I I I I I I I I I I	2 3 3 2 2 8 8 4 4 4 5 5 5 4 4 1 I I I	I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	1 3 1 · · · · · · · · · · · · · · · · ·	1 1 1 1 1 6 6 6 6 3 3 5 5 5 5 4 1 1	3 5	I I I I I I I I I I I I I I I I I I I	I I I 2 I I I 2 I I	22 II 33 55 22 II 66 33 31 II 66 33 31 II 66 33 31 II 66 33 31 II 66 31 II	2 2 2 2 3 3 2 1 I	I	I
34	31	10	10	38	24	12	5	40	37	7	10	33	20	7	3

TABLE No. 2 (Continued)—Showing Deaths by

		Ju	ly.			·Aug	ust.		;	Septe	mber	
Aces.	Wł	iite.	Colo	ored.	Wł	ite.	Colo	red.	Wi	ite.	Colo	ored.
	M.	F.	M.	F.	M.	F.	М.	F.	М.	F.	М.	F.
Under I month Bet. I and 3 mos. Bet. 3 and 12 mos. Bet. 1 and 2 yrs. Bet. 2 and 3 yrs. Bet. 2 and 4 yrs. Bet. 5 and 9 yrs. Bet. 15 and 19 yrs. Bet. 15 and 19 yrs. Bet. 20 and 24 yrs. Bet. 25 and 29 yrs. Bet. 30 and 34 yrs. Bet. 30 and 34 yrs. Bet. 35 and 39 yrs. Bet. 35 and 39 yrs. Bet. 40 and 44 yrs. Bet. 55 and 59 yrs. Bet. 55 and 59 yrs. Bet. 55 and 64 yrs. Bet. 65 and 64 yrs. Bet. 75 and 79 yrs. Bet. 75 and 79 yrs. Bet. 85 and 89 yrs. Bet. 85 and 89 yrs. Bet. 85 and 89 yrs. Bet. 85 and 99 yrs. Bet. 95 and 99 yrs.	3 2 2 2 1 1 2 2 3 3 2 2 1 1 3 3 4 1 1	22 II 33 33 II 4 II 55	I	 I 22 I I	2 3 3 2 2 1 1 5 5 2 2 2 2 3 3 1 1 2 2	1 1 4 2 2 3 3 4 4 3 6 6 4 4 2 2		1 1 2		22 1 2 4 7 7	  I 3 1	1
Total	22	27	8	5	<b>2</b> 6	33	7	12	18	20	10	

BRIGHT'S DISEASE.

Age, Months, Color and Sex, Year 1914.

	Octo	ober.			Nove	mber	•		Dece	mber	•		To	tal.	
Wi	ni <b>te</b> .	Cole	ored.	Wi	nit <b>e.</b>	Col	ored.	Wi	nite.	Cole	or <b>ed</b> .	. Wi	nite.	Cole	ored.
М.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.
36 6 2 2 1 4 4 1 1 1 1 1 1 1	2 2 3 3	· · · · · · · · · · · · · · · · · · ·	2	I I I I I I I I I I I I I I I I I I I	2 2 1 6 4 2 2 5 2 2 1		I 2 4 4 I	I 2 1 3 3 4 4 6 6 2 I	6 3 6 	I	1 1 2 1 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 4 2 2 5 5 6 6 19 22 29 43 32 38 49 40 22 17 7 1 1	1 1 1 2 2 4 3 3 5 11 15 26 28 25 30 33 36 45 43 3 36 6 14 9 3 3	1 2 4 4 2 5 11 13 8 8 14 11 12 8 8 5 2	1 2 4 4 1 1 5 5 6 6 5 5 2 7 7
22	21	5	4	24	29	12	10	41	36	8	11	350	347	101	86

## TABLE No. 3—Showing Deaths by Occupation and Social Condition, Year 1914.

Attorneys	1	Farm laborer	1
Agents (commission)	ī	Firemen (stationary engine).	ī
Brewers	ī	Firemen (Fire Department).	ī
Bakers	5	Foundry workers	ī
Barbers	4	Florists	ī
Bartenders	2	Grocers	Ī
Boarding-house keepers	2	Gold and silversmiths	ī
Brokers (commercial)	I	Glassblowers	I
Butchers	5	Government employees	1
Builders and contractors	3	Hatters	ī
Brassworkers	2	Housewives	193
Bricklayers	2	Hucksters	193
Boxmakers	2	Ice dealers	I
Bookkeepers, clerks	_	Inspectors	I
	19		_
Boat captains	1 8	Ironworkers	2
Carpenters		Jobbers	2
Candymakers	I	Janitors	3
Chambermaids	2	Jewelers (dealers)	2
Chefs	I	Junk dealers	I
Coal dealers	2	Laborers	82
Confectioners	I	Launderers or laundresses	13
Cattle dealers	I	Laundry work (steam)	2
Cabinetmakers	2.	Lamplighters	I.
Collectors	I	Lawyers	I
Coachmen	2	Liquor dealers	Ī
Canmakers	4	Machinists	6
Cigarmakers	5	Manufacturers	2
Cooks	8	Machine manufacturers	I
Conductor (not specified)	I	Moulders	4
Coppersmiths	1	Merchants	10
Coopers	I	Managers	.2
Drivers	13	Midwives	I
Dressmakers and seamstresses	5	Millers	I
Druggists	I	Mill hands	I
Dentists	I	Mariners	3
Doctors	I	Ministers	2
Domestics	50	Musicians	I
Enamel workers	I.	Organmakers	I
Electrical workers	I	Oyster shuckers	1
Engineers (marine)	I	Painters	1
Engineers (civil)	I	Plasterers	3
Engineers (stationary engine)	3	Preachers	2
Elevator boys	I	Packers	I
Foremen	7	Pavers	I
Furniture movers	I	Paperhangers	I
Factory hands	2	Physicians	6
Farmers	3	Plumbers	2
	-		

# TABLE No. 3 (Continued)—Showing Deaths by Occupation and Social Condition, Year 1914.

Policemen and watchmen	7	Storekeepers
Produce dealers	3	Servants 6
Porters	4	Superintendents 1
Printers and engravers	2	Steamfitters
Religieuse	1	Stewards 1
Roofers	2	Stewardesses 1
Restaurant keepers	1	Stevedores 2
Saloonkeepers	3	School children 6
Salesmen	ğ	Tailors or tailoresses 6
Saleswomen	2	Tanners I
Seamen	3 -	Teamsters 1
Steam railway employees	8 I	Teachers 5
Street railway employees:	ı	Tinners 4
Shirt factory hands	ī	Upholsterers I
Shoemakers	7	Waiters 3
Straw hat factory	ήl	Weavers I
Sextons	T	Woodworkers 1
Ship carpenters	7	No occupation 219

## Social Condition.

Unknown       4         Divorced       3         Married       437	Widowers 93
Single	Total884

# TYPHOID FEVER.

# TABLE No. 1-Showing Deaths by Wards, Color, Sex

		Janu	ıary.			Febr	ua <b>ry</b> .	
Wards.	WI	nite.	Colo	ored.	Wł	ite.	Colo	ored
	M.	F.	М.	F.	M.	F.	M.	F.
First								
Second					1		1	
Third		1:					1	ļ
Fourth		1					1	
Fifth		4	•	1		• • • •		• • •
Sixth	1		i		1		1	• • •
Seventh		· · · · ·		•	1	• • • •		
			,					• • •
Eighth		1	i	• • • •		• • • •	• • • •	• • •
Ninth	1		,			• • • •		• • •
Tenth						• • • •		• • •
Eleventh					1		1	• • •
Twelfth		I	1	I	• • • •	• • • •		• • •
Thirteenth			1	• • • •		• • • •		• • •
Fourteenth			1		I			
Fifteenth						I		١٠٠٠
Sixteenth								
Seventeenth				]			I	
Eighteénth							[ · · · · ]	
Nineteenth								
I'wentieth		1	١	1			l l	١
Twenty-first	. п	1	1	1			l l	١
Twenty-second			1	<b>[</b> .		١	l l	١ ,
Twenty-third		1	l	١			1 !	١
Twenty-fourth	1	1						١
Bay View		l				l	1	١
Sydenham			1		::::			
-,		<u> </u>	<u> </u>					<u> </u>
Total	1	3	I	ı	2	I	2	
10ta1	4	3	1	1	2	1	2	

TYPHOID FEVER.

and Calendar Months (Residents Only), Year 1914.

	Ma	r <b>c</b> h.	-		Ap	oril.			M	ay.			Ju	ne.	
Wł	nite.	Colo	ored.	Wi	nite.	Cole	ored.	Wi	nite.	Cole	ored.	Wi	nite.	Cole	ored.
M.	F.	M.	F.	М.	F.	M.	F.	M.	F.	М.	F.	M.	F.	M.	F.
				I	I				I				I	I	I
	2			2			· · · · · · · · · · · · · · · · · · ·		2			 		2	2

TYPHOID FEVER.

TABLE No. 1 (Continued)—Showing Deaths by Wards, Color,

-		Ju	ly.			Aug	gust,		;	Septe	mber	:.
Wards.	Wh	ite.	Colo	ored.	Wł	ıite.	Colo	ored.	W	ite.	Colo	ored
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
irst					T				I	T		
Second									Ī	-		١
Chird		• • • •						• • • •		• • • •		١
	••••	• • • •	• • • •			• • • •	• • • •	• • • •		· · · · <u>·</u>		1
ourth	· • • •				• • • •		• • • •	• • • •		I		
ifth							1					• •
ixth									I		!	
eventh			1									[
ighth	l l	l	١	۱		l					ا ا	١.,
linth		1	l	۱	1				i l		l <sup> </sup>	١
enth												
leventh												1
10.1					2							l
					2		• • • •	• • • •	• • • •			İ
hirteenth		• • • •	• • • •	• • • •		• • • •			I		<b>  • • • •  </b>	1
ourteenth		1				• • • •	• • • •					• •
ifteenth	٠٠,٠								2	I	]	ļ
ixteenth		1				1						١
eventeenth				'				1		<b></b>		١
ighteenth									I		ا ا	١
Vineteenth									ا ا		1	II.
wentieth										т		١.,
<b>\</b>										Ī		١
wenty-hrst										i –		١
wenty-second							• • • •	• • • •	I		• • • •	1
wenty-third	••••							• • • •	• • • •			١٠٠
wenty-fourth	I									Ţ	1	J
ay View	]								[ ]		[ · · · · ]	ļ • • ·
ydenham									ا ا		[]	[
												<u> </u>
Total	2	3	1		5	2	I.	1	8	6	[	1

TYPHOID FEVER.

Sex and Calendar Months (Residents Only), Year 1914.

Od	tob <b>er.</b>		1	Nove	mber.	•		Dece	mber	•		To	tal.	
White.	Col	ored.	Wh	ite.	Colo	ored.	Wł	ite.	Colo	ored.	Wh	ite.	Colo	ored.
M.   F	M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M.	F.
			3	3 3 2	1 1			·		· · · · · · · · · · · · · · · · · · ·	4 2  8 1 1 1 1  1 4 3 3 1 2 2	1 2 4 5 5 1 2 1 3 1 1 2 3	3	22 3
I	I	 	3	IO			I				3 2 2 3 1 1 5 1	 1 4 3  2 3 		

TYPHOID FEVER.

TABLE No. 2—Showing Deaths by Age, Sex, Color

		Jan	u <b>ary.</b>			Febr	uary.	
Ages.	WI	nite.	Colo	ored.	Wi	ite.	Colo	ored.
	M.	F.	M.	F.	М.	F.	М.	F.
Under 1 month								
Bet. 1 and 3 mos		1	1					
Bet. 3 and 12 mos								
D =								ľ
							1	
						i		
								•••
Bet. 4 and 5 yrs								
Bet. 5 and 9 yrs								
Bet. 10 and 14 yrs								
Bet. 15 and 19 yrs	I						I	
Bet. 20 and 24 yrs	2	2		· · · · ·	. <b></b> .			1
Bet, 20 and 24 yrs	I			1	I			
Bet. 30 and 34 yrs	· · · ·		I					
Bet. 35 and 39 yrs	1							
Bet. 40 and 44 yrs		1	<b>.</b> .			1		
Bet. 45 and 49 yrs		1	1				[ ]	
Bet. 50 and 54 yrs		۱			'		l l	
Bet. 55 and 59 yrs								
Bet. 60 and 64 yrs								
Bet. 65 and 69 yrs								
Bet. 70 and 74 yrs								
Bet. 75 and 79 yrs								
Bet, 80 and 84 yrs								• • •
Bet, 85 and 89 yrs								
Bet. 90 and 94 yrs								
Bet. 95 and 99 yrs								• • • •
Det. 95 and 99 yrs		l · · · · .	· · · · ·	• • • •		• • • •	• • • •	• • • •
Total	4	3	I				2	-
10001,	4	ა	-	-	-		1 -	

TYPHOID FEVER.

and Calendar Months (Residents Only), Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ju	ne.	
Wh	ite.	Colo	ored.	Wi	nite.	Colo	red.	Wł	it <b>e.</b>	Cold	ored.	Wi	nite.	Cold	ored.
М.	F.	M.	F.	M.	F.	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.
· · · · · · · · · · · · · · · · · · ·	i			I	I				T I			I	I	I	I
		• • • •	• • • • •	••••				• • • • •				••••			
1	2			2	2		• • • •	1	2		• • • •	5	4	2	2

TYPHOID FEVER.

TABLE No. 2 (Continued)—Showing Deaths by Age, Ses,

	  - 	Ju	dy.		!	Aug	rust.		\$	Septe	mber	•
Ages.	wi	nite.	Colo	ored.	Wł	ite.	Colo	ored.	Wh	ite.	Colo	red.
	M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.
Under 1 month			<u> </u>									
Bet. 1 and 3 mos												
	• • • •				• • • •		• • • •	• • • •	••••	• • • •	· · · ·	• • •
Bet. I and 2 yrs	• • • •				• • • •		• • • •	• • • •	I	• • • •		• • •
Bet. 2 and 3 yrs	• • • •				• • • •	1			• • • •		• • • •	• • •
Bet. 3 and 4 yrs	• • • •				• • • •				' I			
Bet. 4 and 5 yrs	,				• • • •							
Bet. 5 and 9 yrs												
Bet. 10 and 14 yrs										I	]]	
Bet. 15 and 19 yrs		]								1		
Bet. 20 and 24 yrs	· • • •				I	l	I	1		2		ĺ
Bet. 25 and 29 yrs		I	I						1			
Bet. 30 and 34 yrs	I	. I	1		I	1						
Bet. 35 and 39 yrs	I	١				· • • • •	۱ ٔ	l	1	1	l l	
Bet. 40 and 44 yrs			l	١	1	١	١	l	2		1	<b>.</b>
Bet. 45 and 49 yrs Bet. 50 and 54 yrs	٠	1	l		2	۱	١ :	ĺ			1	
Bet. 50 and 54 yrs			İ	l						i		
Bet. 55 and 59 yrs										I	1	
Bet. 60 and 64 yrs												
Bet. 65 and 69 yrs												
Bet. 70 and 74 yrs	1	T			••••				т.	i		
Bet 75 and 70 vrs		1 -	1						•		1	• • •
Bet. 75 and 79 yrs Bet. 80 and 84 yrs					• • • •				••••			• • •
Bet. 85 and 89 yrs		i · · · ·		l	• • • •				• • • •		1	• • •
Bet. 90 and 94 yrs					• • • •				••••			
Bet. 95 and 99 yrs		i			• • • •		• • • •		• • • •		1	
cer al arm an line.				• • • •					• • • •			···
Total	2	3	ī					-	8	6		
I Otal		3	1		5	2	1	I	0	١		

TYPHOID FEVER.

Color and Calendar Months, (Residents Only), Year 1914.

	Octo	ober.			Nove	mber	•		Dece	mber	•		То	tal.	
Wh	ite.	Col	ored.	Wi	nite.	Colo	ored.	WI	nite.	Cold	ored.	Wł	ite.	Colo	red.
М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	M.	F.
I I I I I I I I I I I I I I I I I I I	33	   		I I I I I I I I I I I I I I I I I I I	I			2 2 2 I 2 2	I			 11 22 11 44 12 77 77 44 22 11 11	1 I I I I I I I I I I I I I I I I	1 3 2 2 1	
7	9	2	I	6	10	<u> </u>		7	2		<u> </u>	50	46	9	9

## TYPHOID FEVER.

# TABLE No. 3—Showing Deaths by Occupation and Social Condition (Residents Only), Year 1914.

Agents (insurance) Bakers Barbers Builders and contractors. Bricklayers Blacksmiths Boxmakers Bookkeepers, clerks. Carpenters Chauffeurs Collectors Drivers Drivers Dressmakers and seamstresses Domestics Firemen (stationary engine) Glassblowers Hatters Housewives Hostlers Ironworkers	1 2 1 1 1 1 1 3 2 1 1 1 3 7 1 1 1 22 1 1 1	Laborers Moulders Merchants Nurses Painters Physicians Policemen and watchmen. Porters Salesmen Saleswomen Seamen Street railway employees. Servants Stenographers School children Teachers Tinners Telegraph operators. Waiters No occupation.	III
Married	52 55 4	Widowers	2 1

# TABLE No. 1-Showing Deaths by Wards,

		Janu	1агу.			Febr	uarv.	
Wards.	Wh	ite.	Colo	ored.	Wł	ite.	Colo	ored.
	M.	F.	M.	F.	M.	F.	М.	F.
First Second. Third. Fourth. Fifth Sixth Seventh. Eighth	* <sub>I</sub>	2 I			I	I		
Ninth. Tenth. Eleventh. Twelfth. Thirteenth. Fourteenth. Fifteenth.						I		
Sixteenth. Seventeenth Eighteenth Nineteenth Twentieth								
wenty-second wenty-third wenty-fourth say View ydenham						1		
Total	1	3			1	4	]	

<sup>\*</sup>Died in Sydenham.

SCARLET FEVER.

Months, Color and Sex, Year 1914.

		Ma	rch.		2	Ap	ril.			M	а <b>у</b> .			Jυ	ıne.	
	Wh	ite.	Colo	red.	Wł	ite.	Colo	red.	Wi	it <b>e</b> .	Colo	ored.	Wł	ite.	Colo	red.
	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.
*I	*I		· · · · · · · · · · · · · · · · · · ·		I						•	 	1			
	*I				• • • •											I

# TABLE No. 1 (Continued)—Showing Deaths by

		Ju	ıly.			Au	gust.		,	Septe	mber	·.
WARDS.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.
•	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.
First												
Second		<i>.</i>	۱	1		1	'			1	1	
Third											l	l
Fourth				۱		١	'				1	١
Fifth	- I i									l		l
Sixth											1	
Seventh		•								١	1	
Eighth											١	
Ninth				1							1	
Tenth		ı	::::									
	1 1	i										
Eleventh												• • • •
											1	• • • •
Thirteenth										1		• • • •
Fourteenth	- 1	ı				1						• • • •
Fifteenth			ı				I	i		• • • •		• • • •
Sixteenth												
Seventeenth												
Eighteenth												
Nineteenth			]		/							
Twentieth											]	
Twenty-first	.			1						<b> </b>	]	<b> </b>
Twenty-second							2					
Twenty-third		۱	۱	۱ ا		1	1			۱		
Twenty-fourth	.			1		١	1 '			l	1	<b> </b>
Bay View			١	l <sup>.</sup>		l	1	l			1	l
Sydenham										l	l	l <u>.</u>
			<u> </u>				I—	l			<u> </u>	l
Total			l	т		T	1	1			:	١
2000	-1	· · · ·	1	1 1		•	1 -	1 1	· · · · ·			1

Wards, Months, Color and Sex, Year 1914.

	October	•		Nove	mber			Dece	mber	•		To	tal.	
Whit	e. Co	lored.	Wh	ite.	Cold	ored.	Wi	it <b>e</b> .	Cole	ored.	W	nite.	Colo	ored.
<b>M</b> .	F. M	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
· · · · · · · · · · · · · · · · · · ·	I			*1							2 4 2 I I 1 1 2 1 1 1 2 1	3 3 3 1 1 1 1 1 1 1 2 2 1 1 1 1 2 1 1 1 1	I	1
I	I			2							14	14	3	4

<sup>\*</sup>Died in Sydenham.

TABLE No. 2-Showing Deaths by Age,

		Jan	uary.	_		Febr	uary.	
Ages.	W	iite.	Colo	ored.	Wh	ite.	Colo	red
	M.	F.	M.	F.	M.	F.	М.	F.
Under 1 month								Γ
Bet, I and 3 mos								
Bet. 3 and 12 mos	• • • •			• • • •	• • • •			
	1	• • • •						
Bet. 3 and 4 yrs								
Set. 4 and 5 yrs								
et. 5 and 9 yrs	1	I			]	2		
Bet. 10 and 14 yrs		2						
Bet. 15 and 19 yrs								
Bet, 20 and 24 yrs					· ]		]	١
Bet. 25 and 29 yrs								
Bet. 30 and 34 yrs		<i>.</i>		١			1	١
Bet. 35 and 39 yrs	:  ••••		l				J	١
Bet. 40 and 44 yrs		۱	l				1	١
Bet. 45 and 49 yrs		1	l	1				
Bet. 50 and 54 yrs		1	۱					
Bet. 55 and 59 yrs								
Bet. 60 and 64 yrs								
Bet. 65 and 69 yrs	1						1	
Bet. 70 and 74 yrs	1	i					1	١
Bet. 75 and 79 yrs		l	l				1	١
Bet. 80 and 84 yrs	l		l	ļ			1	١٠٠٠
Bet. 85 and 89 yrs		1	1	1			ļ	١
Bet. 90 and 94 yrs	ļ	١	l			• • • •		١٠٠٠
Bet. 95 and 99 yrs								
			<u> </u>			• • • •	1	· · ·
Total	I	1						
L'Utal	<b>'</b>	3			I	4		١٠٠٠

SCARLET FEVER.

Months, Color and Sex, Year 1914.

	Ma	rch.			Ap	ril.			M	ay.			Ju	ıne.	
Wh	ite.	Colo	red.	Wł	ite.	Colo	ored.	W	ite.	Colo	ored.	W	nite.	Colo	red.
M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
2 2 2 2 I	I I	2	I	2					, , , , , , , , , , , , , , , , , , ,			I			1
7		  	<u>.</u>	2					<u> </u>						

TABLE No. 2 (Continued)—Showing Deaths

		Ju	ly.			Au	gust.		,	Septe	mber	· .
Ages.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.	Wł	ite.	Cold	ored.
	М.	F.	M.	F.	M.	F.	М.	F.	М.	F.	M.	F.
Under I month Bet. I and 3 mos Bet. 3 and 12 mos Bet. 2 and 3 yrs Bet. 2 and 4 yrs Bet. 5 and 9 yrs Bet. 10 and 14 yrs Bet. 15 and 19 yrs Bet. 25 and 29 yrs Bet. 25 and 29 yrs Bet. 35 and 34 yrs Bet. 35 and 34 yrs Bet. 35 and 39 yrs Bet. 40 and 44 yrs Bet. 45 and 49 yrs Bet. 45 and 49 yrs Bet. 50 and 54 yrs Bet. 50 and 54 yrs Bet. 55 and 59 yrs				I		I		I				
Bet. 55 and 59 yrs Bet. 60 and 64 yrs Bet. 65 and 69 yrs Bet. 70 and 74 yrs Bet. 75 and 79 yrs Bet. 80 and 84 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs.												
Total						·I						

SCARLET FEVER.

by Age, Months, Color and Sex, Year 1914.

	Oct	ober.			Nove	mber	:		Dece	mber			To	ital.	
W	ite.	Colo	red.	Wł	ite.	Cold	ored.	Wi	nite.	Colo	ored.	WI	ite.	Colo	red
M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
I					I			 I				1 2 2 3 3 5 5 1 2 2	5 3 3	1 2	I I
1	I		• • • •		2		·	I			••••	14	14	3	4

# WHOOPING COUGH.

TABLE No. 1—Showing Deaths by Wards,

·		Jan	uar <b>y</b> .			Febr	uary.	
. Wards.	W	nite.	Colo	ored.	Wł	nite.	Colo	red.
	M.	F.	M.	F.	M.	F.	М.	F.
First		ļ		İ				
Second	1		1					•••
Third						• • • •	ا…٠	•••
Fourth				2		• • • •		•••
Fifth			::::		1	• • • •	:	•••
Sixth	1		::::			• • • •		• • •
Seventh	1					• • • •		• • •
Eighth								• • •
Vinth		,			i	1	}····}	• • •
renth	1					• • • •	• • • •	• • •
						• • • •	· · · ·	• • •
							• • • •	• • •
		I			• • • •		• • • •	• • •
Thirteenth			• • • •				• • • •	• • •
Fourteenth	1			• • • •		• • • •	• • • •	• • •
Fifteenth				• • • •		• • • •	• • • • •	• • •
Sixteenth				•	· · · ·	• • • •		• • •
Seventeenth		1		• • • •				• • •
Eighteenth		1	I					
Vineteenth		I	1				I	
Twentieth			,	]				
[wenty-first								
[wenty-second						ļ. <b>.</b>	[ ]	
Twenty-third						I	]]	
I wenty-fourth							[	
Bay View							[	
Sydenham		[	1					
		<u> </u>						
Total	T	1 2	1	2	1	1 2	1 1	

WHOOPING COUGH.

Months, Color and Sex, Year 1914.

1	Mar	ch.			Ap	ril.			М	ay.			Ju	ne.	-
White	e.	Colo	red.	Wh	ite.	Colo	red.	Wi	ite.	Colo	red.	Wł	ite.	Colo	red.
М.   І	F.	М.	F.	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.
	I	- 1		· · · · · · · · · · · · · · · · · · ·	I	I	I	I			I	I I I I I I I I I I I I I I I I I I I		I I	
	I		••••	••••									••••		
	3	I	ī	I	3	2	3	5	3	I	3	6	3	4	2

## TABLE No. 1 (Continued)—Showing Deaths by

		Ju	ly.			Aug	gust.		;	Septe	mber	
Wards.	Wh	ite.	Colc	red.	Wł	iite.	Colo	ored.	·Wh	ite.	Colc	red.
	M.	F	М.	F.	M.	F.	M.	F.	М.	F.	M.	F.
First Second Third Fourth Fifth Sixth Seventh Eighth Ninth Tenth Eleventh Twelfth Thirteenth Fourteenth Fifteenth Sixteenth Sixteenth Twenteenth Tidenth Sixteenth Twenteenth Tidenth Sixteenth Twenty-first Twenty-first Twenty-third		· · · · · · · · · · · · · · · · · · ·	I I	I			· · · · · · · · · · · · · · · · · · ·	33	1		I	
Twenty-fourth Bay View Sydenham		· · · · · · · · · · · · · · · · · · ·		  5	· · · · · · · · · · · · · · · · · · ·	3	I	4	I		I	

Wards, Months, Color and Sex, Year 1914.

	Octo	ober.			Nove	mber	·.		Dece	mber	•		To	tal.	
Wh	iite.	Colc	red.	·Wł	ite.	Cold	ored.	WI	nit <b>e</b> .	Colo	ored.	Wi	ite.	Colo	ored.
М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
			  I	  								33 I 33.2.2.2.2 2 I	1	I I I I I I I I I I I I I I I I I I I	23 3 1 22 1 1 1 1 1 3 3 3 1 1 3 3 3 3
				I		I	<u>I</u>						25	19	25

TABLE No. 2-Showing Deaths by Age,

		Janu	агу.			Febr	uary.	
Ages.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.
	M.	F.	М.	F.	M.	F.	М.	F.
Jnder 1 month								
tet. 3 and 12 mos			···· I		···· I			
et. 3 and 4 yrset. 4 and 5 yrs								
et. 5 and 9 yrset. 10 and 14 yrset. 15 and 19 yrs								
et. 20 and 24 yrset. 25 and 29 yrset. 30 and 34 yrs						[		
et. 35 and 39 yrs								
et. 50 and 54 yrs et. 55 and 59 yrs						 		
et. 60 and 64 yrset. 65 and 69 yrset. 70 and 74 yrs		 						• • •
et. 75 and 79 yrset. 80 and 84 yrset. 85 and 89 yrs		<b> </b>		<b>.</b> .				
f. 90 and 94 yrs f. 95 and 96 yrs				<b> </b> .				
Total	I	2	I	2	1	2	I	

WHOOPING COUGH.

Months, Color and Sex, Year 1914.

	Ma	rch.			Ap	ril.			M	a <del>y</del> .			Ju	ne.	
Whi	ite.	Colo	red.	Wh	nite.	Colo	ored.	Wł	ite.	Cold	ored.	Wł	ite.	Colc	red.
М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.
	1 2	I				I	I				2	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	I 2	3 1	
	3	<u> </u>	I	 			3				3	6	3	[	2

Continued on next page.

TABLE No. 2 (Continued)—Showing Deaths

		Jul	y.			Aug	gust.			Septe	mber.	•
Ages.	Whit	te.	Colo	red.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.
	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.
Under I month Bet. I and 3 mos Bet. 3 and 12 mos Bet. I and 2 yrs Bet. 2 and 3 yrs	I	3 3	4 2	I 2 I I		 2 I	 I	 I 3	I		 I	
Bet. 3 and 4 yrs Bet. 4 and 5 yrs Bet. 5 and 9 yrs Bet. 10 and 14 yrs. Bet. 15 and 19 yrs Bet. 20 and 24 yrs.									• • • • • • • • • • • • • • • • • • • •			
Bet. 25 and 29 yrs Bet. 30 and 34 yrs Bet. 35 and 39 yrs Bet. 40 and 44 yrs Bet. 45 and 49 yrs												
Bet. 50 and 54 yrs Bet. 55 and 59 yrs Bet. 60 and 64 yrs Bet. 65 and 69 yrs Bet. 70 and 74 yrs												
Bet. 75 and 79 yrs Bet. 80 and 84 yrs Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs												
Total		6	6			3	<u>  </u>	4			I	1

by Age, Months, Color and Sex, Year 1914.

	Octo	ber.		:	Nove	mber	•		Dece	mber	•		То	tal.	
Wł	ite.	Colc	red.	Wh	ite.	Colc	red.	Wł	ite.	Colo	red.	Wh	ite.	Colo	red.
М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	М.	F.
• • • • • • • • • • • • • • • • • • • •											<b></b> .		 4 13 7	10 7	 2 13 4
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••••						•									
••••			<b> </b>						<b> </b>						• • • • •
••••											i				
	<u></u>		i		.: 			 	: : : : 	<b> </b>		18			25

### MEASLES.

#### TABLE No. 1-Showing Deaths by Wards

•		Jan	uary.			Febr	uary.	
Wards.	Wi	ite.	Colo	ored.	Wł	ite.	Colo	or <b>e</b> d.
	M.	F.	M.	F.	M.	F.	М.	F.
First	ļ	Ì	İ		i 	i		
Second								
Third		l				l		l
Fourth			1				l	l
Fifth								l
Sixth								1
Seventh						1	1	l
Lighth			1		• • • •	١	1	
Ninth				١٠٠٠٠				١
Centh			1				1	١
Eleventh							1	١
I welfth	• • • •		l::::		• • • •		1	
Thirteenth	• • • •	1			• • • •		1	١
Fourteenth			1					١٠٠٠
Fifteenth					• • • •			١٠٠٠
				• • • •	• • • •			
Sixteenth		I			• • • •			١٠٠٠
Seventeenth	• • • •	· • • •		• • • •	••••			• • •
Eighteenth	• • • •	l I			I	• • • •		
Nineteenth			• • • •			• • • •		· · ·
Iwentieth						• • • •		• • •
[wenty-first							· · · ·	ļ
Twenty-second								
Twenty-third								<b> </b> .
I'wenty-fourth						ļ	<b> </b>	
Bay View		ļ	1	l				
Sydenham		l	1	<b> </b>		J	J	<b> </b> .
			<b> </b>		ļ		l	
Total	1	2	1	1	' T	1	1	t

MEASLES.

Months, Color and Sex, Year 1914.

	Ma	rch.			Aŗ	oril.			M	ay.		-	Ju	ne.	
Wh	ite.	Colc	ored.	Wh	ite.	Colo	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Colo	ored.
М.	F.	M.	F.	М.	F.	М.	F.	M.	F.	M.	F.	М.	F.	M.	F.
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Continued on next page.

MEASLES.

Table No. 1 (Continued)—Showing Deaths by .

	i	Ju	ıl <b>y</b> .			Aug	gust.		;	Septe	mber	•
Wards.	W	ite.	Colo	ored.	Wł	ite.	Cole	ored.	Wh	ite.	Colo	ored
•	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.
		<u> </u>		¦	-	!				!	i	¦
First	!	١		l			l	Ì			l	l
Second						l	l	İ		l	l	l
Third										l	l	l
Fourth							1 :			l	l	١
Fifth	'						1 1				<b></b>	l
Sixth												١
Seventh			1	i			1				Ì	١
Lighth							ŀ	۱		İ	l	١
Ninth							l				1	١
Centh										İ	l	١
Eleventh							l				l	١
Cwelfth			1									١
l'hirteenth										l	1	١
ourteenth		1	l			l	l l	1			l	١
ifteenth			1				1 !			<b> </b>	1	١
Sixteenth		l					l	١				١
Seventeenth			l		·	l	l '			١	1	١
Eighteenth		l	1				'	١		<i>.</i>	1	١
Vineteenth			1				İ '			<b> </b>	1	١
I'wentieth			l				1 '			١		۱
I'wenty-first		1	1	۱		۱	١	l		1	۱	۱
I wenty-second						l	1	l:		1	١	١
I'wenty-third			1			<b> </b>	1 !	١			۱	۱
wenty-fourth		l										١
Bay View							!			١		١
Sydenham		l			١					<b> </b>	1	١
			<u> </u>		,							
Total	i	l	١	İ	:  ••••	İ		١	٠	1	l	١
_ 300011111	1	1	1.			1				İ		1

MEASLES.

Wards, Months, Color and Sex, Year 1914.

C	Octobe	r.		Nove	mber	•		Dece	mber	• .		To	tal.	
Whit	e: C	olored.	Wi	ite.	Colo	ored.	Wh	it <b>e.</b>	Colo	ored.	Wi	ite.	Colo	ored.
М.	F. M	[. F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	F.	M.	F.
											· · · · · · · · · · · · · · · · · · ·			
						• • • •		• • • •				4		

#### MEASLES.

TABLE No. 2-Showing Deaths by Age,

			Jan	uary.			Febr	uary.	
Ages	<b>3.</b>	W	nite.	Colo	ored.	Wh	ite.	Colo	ored
		M.	F.	М.	F.	M.	F.	M.	F.
Jnder 1 month					<u> </u>				
							l: : : :		١
		1	::::					1	١
			i			;• · · · ·			
			l.:	ı			l	1	١
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	••••••								
	• • • • • • • • • • • • • • • • • • • •								
Bet. 20 and 24 yrs							• • • •		
Bet. 25 and 29 yrs									
Bet. 30 and 34 yrs									
Bet. 35 and 39 yrs					• • • •	• • • •	• • • •		
Bet. 40 and 44 yrs					,				
Bet. 45 and 49 yrs								1	
Bet. 50 and 54 yrs	· · · · · · · · · · · · · · · · · · ·	•   • • • •				1	í		• • •
Bet. 55 and 59 yrs	• • • • • • • • • • • • • • • • • • • •	•   • • • •						• • • •	
Bet. 60 and 64 yrs	• • • • • • • • • • • • • • • • • • • •	•   • • • •	i						• • •
3et. $65$ and $69$ yrs		•   • • • •							:
3et. 70 and 74 yrs								1	• • •
3et. 75 and 79 yrs							• • • •	1	ļ · · ·
Bet. 80 and 84 yrs		•   • • • •							• • •
3et. 85 and $89$ yrs								ļ	
Bet. 90 and 94 yrs									
3et. 95 and 99 yrs		•   • • • •		ļ	ļ		ļ <i>.</i>	]	
<b>.</b>									
Total		.	2		l <b>.</b> .	I	1	1	

MEASLES.

## Months, Color and Sex, Year 1914.

	Ma	rch.			Αŗ	ril.			M	a <b>y.</b>			Ju	ne.	
Wh	ite.	Colo	ored.	Wh	ite.	Colo	ored.	Wh	ite.	Cole	ored.	Wh	ite.	Colo	ored.
M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.
						-					 				İ
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Continued on next page.

### MEASLES.

TABLE No. 2 (Continued)—Showing Deaths

		Ju	ly.			Aug	gust.		;	September.			
AGES.	Wh	ite.	Colo	ored.	W	ite.	Colored.		Wh	ite.	Colored		
•	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	
Under 1 month	-												
Bet. I and 3 mos.													
Bet. 3 and 12 mos.											[		
Bet. I and 3 mos. Bet. 3 and 12 mos. Bet. I and 2 yrs	·											١٠٠٠	
Bet. 2 and 3 yrs	١												
Bet. 3 and 4 yrs								,				١	
Bet. 4 and 5 yrs		<b>.</b>			. <b></b> .					1		ł	
Bet. 5 and 9 yrs				1		l				1		١	
Bet. 10 and 14 yrs				1						1		۱	
Bet. 15 and 19 yrs	'	l				l	١	l		۱	l	١	
Bet. 20 and 24 yrs			۱ ا	۱	l		۱	l	l	1	1	١	
Bet. 25 and 29 yrs													
Bet. 30 and 34 yrs		i			l	l	۱	l	l	١		١	
Bet. 30 and 34 yrs Bet. 35 and 39 yrs Bet. 40 and 44 yrs										İ	١	۱	
Bet. 40 and 44 vrs		i	l			l <b>.</b>	l			1	١:	١	
Bet. 45 and 49 yrs	1											١	
Bet. 50 and 54 yrs													
Bet. 55 and 59 yrs													
Bet. 60 and 64 yrs												l	
Bet. 65 and 60 yrs										1		1	
Bet. 70 and 74 yrs							1						
Bet. 75 and 79 yrs		l					1	l	l <b>.</b>		1	l	
Bet. 80 and 84 yrs	•			١٠٠٠.			1	[	l	l	1	l	
Bet. 8s and 80 yrs	• • • •										1	I	
Bet. 85 and 89 yrs Bet. 90 and 94 yrs Bet. 95 and 99 yrs	••••						1	l		١			
Bet of and on ves							1			l	1	١	
oce yo and yy yrs	• • • • •				• • • • •	····	····				· · · ·	<u> </u>	
Total			\										
1 Otal							1	1	• • • •				

MEASLES.

by Age, Months, Color and Sex, Year 1914.

Oct	ober.			Nove	mber	•		Dece	mber	• .		To	tal.	
White.	Colo	red.	Wh	ite.	Colo	red.	Wh	ite.	Colo	red.	Wh	ite.	Colc	ored.
M.   F.	М.	F.	М.	F.	M.	F.	M.	F.	М.	F.	M.	F.	M.	F.
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## ANNUAL REPORT

OF THE

## QUARANTINE STATION

#### Report of the Quarantine Station.

BALTIMORE, January 2, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

DEAR SIR:

I herewith submit my annual report of Quarantine Station and Hospital for the year ending December 31, 1914.

Seven hundred and fifty vessels were boarded and inspected during the year. The crews numbered 26,499, and passengers carried were 21,349, making a total of 47,798 persons examined during the year.

The total receipts of the Station from all sources during the year amounted to \$18,512.97.

Three hundred and fifty-four cases of smallpox were treated in the Hospital and 92 suspects or contacts cared for in the Detention House, making a total of 446 persons received and cared for during the year.

One case of smallpox was in the Hospital from the year 1913. Three hundred and twenty-seven cases came from the city, 18 from the counties and vessels, and eight cases developed in the Detention House among the contacts. In addition to this number of patients there were also received in the Detention House 82 contacts from the city and 10 from the counties and vessels.

There were four deaths in the Hospital from smallpox during the year.

The tables herewith show more in detail the work of the year.

Respectfully submitted,

Thos. L. Richardson, M. D., Quarantine Officer.

Table No. 1—Number of Vessels Boarded and Inspected and the Number of Persons Examined at Quarantine Station During the Year Ending December 31, 1914.

	Number of	Number	of Persons In	spected.
Months.	Vessels Inspected.	Crews.	Passengers.	Total.
January	46	1,911	1,743	3,654
February	48	1,948	2,007	3,955
March	54	2,077	3,315	5,392
April	55	2,1 <b>52</b>	4,401	6,553
May	62	2,560	3,754	6,314
une	72	2,664	2,926	5,590
[uly		3,019	3,167	6,186
August	60	1,663	9 1	1,672
September	74	2,451	II	2,462
October	65	1,814	9	1,823
November	76	2,090	4	2,094
December	69	2,100	3	2,103
Total	750	26,499	21,349	47,798

Table No. 2—Amount of Money Received for Quarantine Fees and Paid into the City Treasury During the Year Ending December 31, 1914.

Months,	Vessels.	Care of Patients, Fumigation of Vessels, etc.	Total.
JanuaryFebruary	\$1,172 07 1,223 26		\$1,434 07 1,443 26
March	1,127 42	180 00	1,307 42
April	1,328 81		1,368 06
May	1,286 70	1 . 1	1,567 80
June	1,404 33		1,838 91
July	1,556 01	380 30	1,936 31
August	1,066 89	275 00	1,341 89 1,838 91
September	1,533 91 1,230 44	305 00 165 00	1,455 44
November	1,475 16		1,600 16
December	1,420 32	90 00	1,510 32
Total	\$15,885 32	\$2,627 65	\$18,512 97

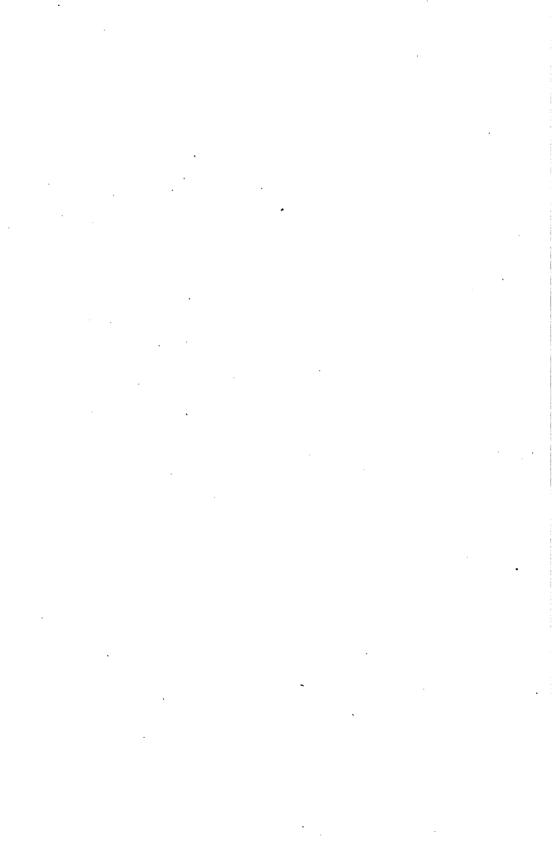
TABLE No. 3—Number of Patients Treated and Suspects Detained at Quarantine Hospital During the Year Ending December 31, 1914.

Disease.	Remaining in Hospital from 1913.	Received in 1914.	Total.	Discharged in 1914.	Deaths in 1914.	Remaining in Hospital December 31, 1914.	Total.
Smallpox		353 92	354 92	350 92	4		354 92
Total	1	445	446	442	4		446

## TABLES OF VITAL STATISTICS

OF BALTIMORE CITY

FOR THE YEAR ENDING DECEMBER 31, 1914



# VITAL STATISTICS FOR THE CITY OF BALTIMORE FOR THE YEAR ENDING DECEMBER 31, 1914.

Estimated population (as of July 1, 1914)	579,593
Births reported—white males 5,477	
Births reported—white females 5,188	
10,665	
Births reported—colored males	
Births reported—colored females	
I,072	
-19/-	
Total births reported	12,637
Birth rate per 1,000 of the population, whole	21.08
Birth rate per 1,000 of the population, white	21.67
Birth rate per 1,000 of the population, colored	23.71
Total mortality—white males	23./1
Total mortality—white females 3,695	
7,914	
Total mortality—colored males	
Total mortality—colored females	
<b>2,637</b>	
Total deaths reported	10,551
Annual death rate per 1,000 of the population, whole	18.20
Annual death rate per 1,000 of the population, less non-resi-	
dents	17.20
Annual death rate per 1,000 of the population, white	16.08
Annual death rate per 1,000 of the population, less non-resi-	
dents	15.09
Annual death rate per 1,000 of the population, colored	30.18
Annual death rate per 1,000 of the population, less non-resi-	
dents	29.10
Total deaths from typhoid fever	130
Total deaths from measles	6
Total deaths from scarlet fever	36
Total deaths from whooping cough	90
Total deaths from diphtheria and croup	91
•	•

Total deaths from dysentery Total deaths from tuberculosis Total deaths from other forms of tuberculosis Total deaths from cancer Total deaths from anaemia Total deaths from diseases of the heart Total deaths from diseases of the heart Total deaths from bronchitis Total deaths from pneumonia Total deaths from diarrhoea and enteritis, under two years Total deaths from diarrhoea and enteritis, over two years Total deaths from Bright's disease Total deaths from puerperal hemorrhage Total deaths from puerperal septicaemia Total deaths from puerperal sopticaemia Total deaths from puerperal convulsions Total deaths from sunstroke and heat Total deaths from sucides Total deaths from sucides Total deaths from homicides Total deaths from homicides Total deaths of children under five years  Deaths in Public Institutions, etc.  Baltimore City Jail Penitentiary Total  Total  Deaths in Quests  Total  Number of coroners' inquests  Number of non-residents dying within the city limits, white  487		
Total deaths from tuberculosis	Total deaths from influenza	72
Total deaths from tuberculosis	Total deaths from dysentery	ġ
Total deaths from other forms of tuberculosis.  Total deaths from cancer  Total deaths from anaemia  Total deaths from diseases of the heart.  Total deaths from bronchitis  Total deaths from bronchitis  Total deaths from pneumonia  Total deaths from diarrhoea and enteritis, under two years.  Total deaths from Bright's disease.  Total deaths from puerperal hemorrhage  Total deaths from puerperal septicaemia  Total deaths from puerperal septicaemia  Total deaths from puerperal convulsions  Total deaths from sunstroke and heat  Total deaths from sunstroke and heat  Total deaths from suicides  Total deaths from homicides  Total deaths from homicides  Total deaths from homicides  Total deaths from homicides  Total deaths of children under five years  Deaths in Public Institutions, etc.  Baltimore City Jail  Penitentiary  Total  Total  Penitentiary  Total  Total deaths of children under five years  2,524  Total  Number of coroners' inquests  Number of autopsies  Number of non-residents dying within the city limits, white.  487	Total deaths from tuberculosis	1,145
Total deaths from cancer Total deaths from anaemia Total deaths from diseases of the heart Total deaths from bronchitis Total deaths from bronchitis Total deaths from pneumonia Total deaths from diarrhoea and enteritis, under two years Total deaths from diarrhoea and enteritis, over two years Total deaths from Bright's disease Total deaths from puerperal hemorrhage Total deaths from puerperal septicaemia Total deaths from puerperal convulsions Total deaths from sunstroke and heat Total deaths from sunstroke and heat Total deaths from sccidents Total deaths from homicides Total deaths from homicides Total deaths from homicides Total deaths from homicides Total deaths from homicides Total deaths from homicides Total deaths from homicides Total deaths of children under five years  Deaths in Public Institutions, etc.  Baltimore City Jail Penitentiary Hospitals and asylums  2,524 Total  Number of coroners' inquests Number of non-residents dying within the city limits, white 487		199
Total deaths from anaemia  Total deaths from diseases of the heart  Total deaths from bronchitis  Total deaths from pneumonia  Total deaths from pneumonia  Total deaths from diarrhoea and enteritis, under two years  Total deaths from diarrhoea and enteritis, over two years  Total deaths from Bright's disease  Total deaths from puerperal hemorrhage  Total deaths from puerperal septicaemia  Total deaths from puerperal convulsions  Total deaths from sunstroke and heat  Total deaths from sunstroke and heat  Total deaths from suicides  Total deaths from homicides  Total deaths of children under five years  Deaths in Public Institutions, etc.  Baltimore City Jail  Penitentiary  Hospitals and asylums  Total  Total  Augusts  Augusts  Augus		596
Total deaths from bronchitis  Total deaths from pneumonia  Total deaths from pneumonia  Total deaths from diarrhoea and enteritis, under two years.  Total deaths from diarrhoea and enteritis, over two years.  Total deaths from Bright's disease.  Total deaths from puerperal hemorrhage  Total deaths from puerperal septicaemia  Total deaths from puerperal convulsions  Total deaths from sunstroke and heat.  Total deaths from accidents  Total deaths from suicides  Total deaths from suicides  Total deaths from homicides  Total deaths of children under five years.  Deaths in Public Institutions, etc.  Baltimore City Jail  Penitentiary  Hospitals and asylums  Total  Total  2,522  Total  Number of coroners' inquests  Number of autopsies  Number of non-residents dying within the city limits, white.  487		24
Total deaths from pneumonia Total deaths from diarrhoea and enteritis, under two years. Total deaths from diarrhoea and enteritis, over two years. Total deaths from Bright's disease. Total deaths from puerperal hemorrhage Total deaths from puerperal septicaemia Total deaths from puerperal convulsions Total deaths from sunstroke and heat. Total deaths from accidents Total deaths from suicides Total deaths from suicides Total deaths from homicides Total deaths of children under five years.  Deaths in Public Institutions, etc.  Baltimore City Jail Penitentiary Hospitals and asylums.  Total  Z,552  Number of coroners' inquests. Number of autopsies Number of non-residents dying within the city limits, white.  487	Total deaths from diseases of the heart	1.067
Total deaths from pneumonia Total deaths from diarrhoea and enteritis, under two years. Total deaths from diarrhoea and enteritis, over two years. Total deaths from Bright's disease. Total deaths from puerperal hemorrhage Total deaths from puerperal septicaemia Total deaths from puerperal convulsions Total deaths from sunstroke and heat. Total deaths from accidents Total deaths from suicides Total deaths from suicides Total deaths from homicides Total deaths of children under five years.  Deaths in Public Institutions, etc.  Baltimore City Jail Penitentiary Hospitals and asylums.  Total  Z,552  Number of coroners' inquests. Number of autopsies Number of non-residents dying within the city limits, white.  487	Total deaths from bronchitis	159
Total deaths from diarrhoea and enteritis, under two years. Total deaths from diarrhoea and enteritis, over two years. Total deaths from Bright's disease. Total deaths from puerperal hemorrhage Total deaths from puerperal septicaemia Total deaths from puerperal convulsions Total deaths from sunstroke and heat. Total deaths from accidents Total deaths from suicides Total deaths from suicides Total deaths from homicides Total deaths of children under five years.  Deaths in Public Institutions, etc.  Baltimore City Jail Penitentiary Hospitals and asylums.  Total.  2,522  Total.  Number of coroners' inquests.  Number of non-residents dying within the city limits, white.  487		1,201
Total deaths from Bright's disease		564
Total deaths from Bright's disease	Total deaths from diarrhoea and enteritis, over two years	78
Total deaths from puerperal hemorrhage 17 Total deaths from puerperal septicaemia 33 Total deaths from puerperal convulsions 15 Total deaths from sunstroke and heat 16 Total deaths from accidents 400 Total deaths from suicides 138 Total deaths from homicides 430 Total deaths of children under five years 2,632  Deaths in Public Institutions, etc.  Baltimore City Jail 9 Penitentiary 14 Hospitals and asylums 2,529 Total 2,520  Total 2,520 Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487		798
Total deaths from puerperal septicaemia 33 Total deaths from puerperal convulsions 15 Total deaths from sunstroke and heat 16 Total deaths from accidents 400 Total deaths from suicides 138 Total deaths from homicides 430 Total deaths of children under five years 2,632  Deaths in Public Institutions, etc.  Baltimore City Jail 9 Penitentiary 16 Hospitals and asylums 2,524 Total 2,552  Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487		II
Total deaths from puerperal convulsions 15 Total deaths from sunstroke and heat 14 Total deaths from accidents 400 Total deaths from suicides 138 Total deaths from homicides 430 Total deaths of children under five years 2,630  Deaths in Public Institutions, etc.  Baltimore City Jail 9 Penitentiary 14 Hospitals and asylums 2,520 Total 2,552  Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487		35
Total deaths from accidents  Total deaths from suicides  Total deaths from homicides  Total deaths of children under five years  Deaths in Public Institutions, etc.  Baltimore City Jail  Penitentiary  Hospitals and asylums  Total  Total  2,524  Total  Number of coroners' inquests  Number of autopsies  Number of non-residents dying within the city limits, white.  487	Total deaths from puerperal convulsions	15
Total deaths from suicides	Total deaths from sunstroke and heat	14
Total deaths from homicides 43 Total deaths of children under five years 2,632   Deaths in Public Institutions, etc.  Baltimore City Jail 9 Penitentiary 14 Hospitals and asylums 2,525  Total 2,552  Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487	Total deaths from accidents	402
Total deaths of children under five years	Total deaths from suicides	138
Deaths in Public Institutions, etc.  Baltimore City Jail	Total deaths from homicides	43
Baltimore City Jail	Total deaths of children under five years	2,632
Baltimore City Jail	· -	
Penitentiary 14 Hospitals and asylums 2,525  Total 2,552  Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487	Deaths in Public Institutions, etc.	
Penitentiary 14 Hospitals and asylums 2,525  Total 2,552  Number of coroners' inquests 1,426 Number of autopsies 65 Number of non-residents dying within the city limits, white 487	Baltimore City Jail	. 9
Hospitals and asylums		-
Total		
Number of coroners' inquests	_	
Number of autopsies	Total	2,552
Number of autopsies	Number of coroners' inquests	T 426
Number of non-residents dying within the city limits, white 487		
	•	-
	=	95

HOWARD A. MOORE, Statistician.

TABLE II-Number of Deaths According to

<b>A</b> 2.22	Ja	n.	F	b.	Ma	rch.	Ap	ril.	M	a <b>y</b> .
Ages.	М.	F.	М.	F.	M.	F.	М.	F.	M.	F.
Under 3 months  Bet. 3 and 12 months  Bet. 1 and 2 yrs  Bet. 2 and 3 yrs  Bet. 3 and 4 yrs  Bet. 4 and 5 yrs	39 15 14 8 3	26 4 14 4 6	44 18  14 6 2 4	25 17 10 5 1	51 22 18 7 4 1	28 24 14 5 1 2	33 20 12  4 2	33 22 10 1 2	34 23 13 6 2 3	25 21 10  2
Total under 5 yrs.	, <b>8</b> o	55	88	59	103	74	71	68	81	59
Bet. 5 and 9 yrs Bet. 10 and 14 yrs Bet. 15 and 19 yrs Bet. 20 and 24 yrs Bet. 30 and 34 yrs Bet. 35 and 39 yrs Bet. 40 and 44 yrs Bet. 45 and 49 yrs Bet. 55 and 54 yrs Bet. 55 and 64 yrs Bet. 55 and 69 yrs Bet. 70 and 74 yrs Bet. 70 and 74 yrs Bet. 80 and 84 yrs Bet. 90 and 94 yrs Bet. 90 and 94 yrs Bet. 105 and 104 yrs Bet. 105 and 104 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Bet. 105 and 109 yrs Unknown age	9 36 14 18 9 15 28 15 25 34 32 14 20 4 2	58 87 144 144 7 166 21 17/ 265 333 25 34 266 27 13. 	4 6 4 12 18 12 26 26 26 19 30 17 32 23 13	7 1 8 9 5 10 20 22 30 26 23 14 11 3 3 	6 4 5 21 19 21 16 25 22 34 33 37 40 45 22 14	6 4 11 13 10 11 11 11 16 20 19 24 36 25 16 9 3 3 1	9 5 6 11 13 17 22 26 25 20 21 18 10 6 2 2	111 1 2 9 14 8 10 11 23 30 25 24 23 114	6 4 4 4 5 9 17 14 25 20 26 22 26 18 11 3 3	5 6 6 14 11 12 14 11 12 15 19 20 22 23 19 13 10
Total	392	364	372	336	475	387	<b>3</b> 55	318	351	289

Age and Sex During the Year 1914-White.

Jur	ne.	Ju	ly.	Aı	ug.	Se	pt.	O	et.	No	ov.	De	ec.	
M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	Total.
33 24 6 3 3	30 12 4 1 1	41 67 15 4 3 5	37 52 15 3 2	47 56 13 4 1	51 42 12 3	40 30 10 9 1	31 24 11 4 2	33 24 9 2 1	30 28 7 1 6 4	43 19 13 6 4 4	28 24 7 6 1	35 6 9  2 1	34 14 9 2 1	851 608 269 90 58 44
70	49	135	111	124	111	92	72	70	<b>7</b> 6	89	69	53	61	1,920
44 88 111 17 18 12 15 18 20 22 17 14 6 6 2	8 1 1 9 12 6 6 6 12 15 16 6 16 17 20 25 26 3 1 1	58 66 512 177 155 200 244 144 19 155 151 23 111 122 11	2 4 4 4 10 9 10 6 14 17 12 16 18 12 10 5 4	6 7 7 4 122 8 8 8 122 15 16 20 19 17 16 10 3 3	4 2 2 5 5 5 8 8 7 13 10 12 10 12 12 22 11 16 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	7 3 3 2 7 20 7 13 19 15 17 24 22 28 20 7 12 4	34 55 88 99 79 99 122 155 169 144 111 311	3 2 2 5 8 8 12 12 11 11 18 24 26 18 22 15 10 9 2	5 4 4 8 8 9 9 11 9 9 30 13 17 18 11	8 4 7 8 9 12 14 18 15 23 24 11 6 5	4 4 5 8 10 9 18 13 14 17 15 16 18 14 29 12 8 3 	8 4 3 17 12 18 18 22 30 31 17 12 7 5	6 1 10 100 6 9 144 9 22 226 288 17 13 8 8 2	136 93 138 257 277 281 326 374 419 477 538 558 578 438 305 150 48 10
292	262	368	300	340	294	319	257	278	272	321	286	356	330	7,914

TABLE III-Number of Deaths According to

	Ja	n.	Fe	eb.	Ma	rch.	Ap	ril.	Ma	y.
Ages.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.
Under 3 months  Bet. 3 and 12 months  Bet. 1 and 2 yrs  Bet. 2 and 3 yrs  Bet. 3 and 4 yrs  Bet. 4 and 5 yrs	11 8 6 2 1	13 9 4 1 2 2	18 12 4 1 1	12 7 4 2	12 6 14 2 2	10 6 4 2 1 1	10 10 6 3 6	21 9 2 3 2 1	7 8 8 2 2	8 10 8 4 5
Total under 5 yrs.	28	31	36	27	38	24	35	38	27	35
Bet. 5 and 9 yrs  Bet. 10 and 14 yrs  Bet. 20 and 24 yrs  Bet. 25 and 29 yrs  Bet. 30 and 34 yrs  Bet. 35 and 39 yrs  Bet. 40 and 44 yrs  Bet. 50 and 54 yrs  Bet. 55 and 59 yrs  Bet. 60 and 64 yrs  Bet. 65 and 69 yrs  Bet. 70 and 74 yrs  Bet. 75 and 79 yrs  Bet. 80 and 84 yrs  Bet. 90 and 94 yrs  Bet. 90 and 94 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 100 and 104 yrs  Bet. 105 and 109 yrs  Unknown age	6 9 55 8 5 14 8 4 4 3	3 1 1 5 5 8 8 5 5 6 7 1 3 3 3 6 6 4 4 4 1	8 6 9 14 11 9 2 7 4 2 4	71 11 55 28 8 9 13 4 4  1	2 3 5 5 5 7 7 13 100 10 9 10 7 4 4 2	1 1 9 8 8 6 5 10 9 9 8 8 7 9 6 6 8 8 1 1	2 4 4 9 4 9 7 13 3 6 9 4 5 5 2	5 100 111 100 9 6 6 8 8 9 7 7 1 1	1 3 7 7 7 6 12 6 6 11 8 6 6 4	4 2 2 6 6 5 5 8 8 4 8 2 2 2 1 4
Total	109	124	125	110	137	130	128	136	112	113

Age and Sex During the Year 1914—Colored.

							·							
Jur	ie.	Ju	ly.	Aı	1g.	Se	pt. {	O	ct.	No	v.	De	ec.	
М.	F.	M.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M.	F.	Total
5 11 3 3 3 1	4 5 4 	16 22 8 2 1 1	14 15 3 1	16 14 8  3 1	12 10 5 1	13 12 7 2	11 11 4 1 2	10 9 1 1 1 2	8 8 4  1		10 4 5 1 1	8 5  I	10 3 4 2	276 219 125 38 36 18
26	14	50	<b>3</b> 3	42	29	. 34	30	24	22	28	23	19	19	712
2 3 2 8 8 8 7 13 7 8 8 11 1 5 6 1 1	33 55 75 96 11 54 4 1	1 3 3 3 8 8 7 3 6 6 10 4 4 11 1 5 4 4 7 7 3 3 2 2	6 3 6 8 8 1 9 5 7 7 6 6 2 2 2 2 2 2 2	1 4 6 6 7 4 9 5 10 5 5 4 5 1 3 3	1 1 4 99 8 4 4 7 99 5 5 5 4 4 2 2 7 4 4 2 2	1 1 1 1 8 8 8 8 8 9 6 6 5 5 11 1 7 4 4 2 2 1 1 1	1 4 5 5 4 4 3 6 8 8 3 7 7 5 7 2 2 1	1 4 5 7 8 3 9 5 5 7 4 4 8 5 5 2 2 3 1	2 66 68 8 3 9 9 9 5 5 4 4 4 1 1 3 3 2 2 1 I	1 3 4 7 7 1 1 6 10 11 8 8 8 5 5 6 6 3 3 1 1	2 2 2 3 3 7 2 4 9 4 8 8 3 3 5 5 4 3 2 2 2 2	1 1 2 7 4 4 10 7 6 8 8 10 3 5 5 4 5 5 2	1 2 6 6 8 8 8 2 2 4 6 6 9 111 6 6 7 3 3 3 2 2 2 1 1	56 29 91 157 144 188 199 186 189 133 134 91 82 50 31 7 6
114	89	130	99	106	105	109	86	96	90	108	87	94	100	2,637

Total.	844. 844. 858. 858. 858. 858. 858. 858.	10,551		Total	6,745
Dec.	84200	8		Dec	565
Nov.	020 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	803		Nov.	654
Oct	22 2 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	736		<b>9</b> 0	655
Sept.	4 6 1 8 6 4 5 8 6 6 8 6 8 6 8 6 8 6 8 6 8 8 8 8 8 8	771		Sept	574
-SuA	2276 1001 1001 1001 1001 1001 1001 1001 10	845		.guV	531
.Vlul	22.21 22.22 22.23 22.23 23.23 24.1	897		July.	ठू
June.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	757		June.	831
May.	222 223 1107 1113 65 65 65	865		.хьМ	415
.linqA	25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	937	1914	.linqA	573
March.	1000 1100 1100 1100 1100 1100 1100 110	943 1,129	Year 1914.	Матсћ.	416
Feb.	4880000 a a a a a 4	943	Marriages for the	Feb.	473
Jan.	280 265 107 121 105 96 96 1	8	ges fo	Jan.	554
NATIVITY.	United States—White males.  United States—White females.  United States—Colored males.  United States—Colored females.  Foreign—White males.  Foreign—Colored males.  Foreign—Colored females.  Foreign—Colored males.  Unknown—White females.  Unknown—White females.  Unknown—Colored males.  Unknown—Colored males.	Total	Marri		Marriages

TABLE V-Number of Births Reported During the Year 1914.

I ABLE V IV WMOET	umoer	of Bi	BIFTINS I	ceport	Keported Luring		the Y	rear 1	1914.				
SEX AND COLOR.	Jsn.	Feb.	Матсh.	.li1qA	May.	June.	·July.	.¤uA	Sept.	.t <sub>2</sub> O	.voV	Dec.	Total.
White males. White females Colored males. Colored females	519 471 73 95	403 350 112 87	25 8 8 8 8 8	426 412 61 94	393 66 70 70	458 83 83	794 17 12 14	437 88 89	8 × 50 × 8	833 833 92	44 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	28 28 28 28 28	5,477 5,188 965 1,007
Total	1,158	ì	952 1,112	88	. 84	1,040	948 1,040 1,046 1,064 1,053 1,126	1,064	1,053	1,126	8		1,156 12,637
White males. White females. Colored males. Colored females.	22 26 15 21	14 16 25 17	120 20 16	8 12 10 20	88 171	13 14 13 21	11 16 16 5	11 12 25 24	00 20 14	7 14 23 19	12 11 11 17	17 7 18 18	144 156 214 218
Total	<u>%</u>	72	<b>∞</b>	55	51	19	84	72	53	63	51	8	732
Still Births. White males. White females. Colored males. Colored females.	4 01 01 01 01 01 01 01 01 01 01 01 01 01	25 14 11	38	38 17 24 14	£1.00 15.00	18 88 88 88	22 22 15	22 11 9	30 14 21 14	39 18 10	15 6 4 4 1 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4	848 8 5	414 196 255 161
Total	8	71	76	93	8	85	8	57	79	8	78	112	1,026

			-			_							
Hospitals, Institutions, Erc.	lan.	Feb.	лаМ.	.li1qA	May.	June,	July.	.gnĄ	Sept.	Oct.	.voV	Dec.	Total.
Hospitals— Resident, white	118		130	112	107	016	112	8	26	8	101		
Resident, colored Non-resident, white	£ 800	18 2 c	8 8 8 X	242	36	800	88,	312	္ကထ္က င	8 25	338	8 55 7	381 457
E 40	. <u>0</u>		33	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	22	7 21	, 61	31	75	4	21	, 8	
Resident, colored Non-resident, white Non-resident, colored	40:		нин	44:	. 6	9 m	я н :	9 9 :	7	∞ ທ ∶	3	4 : H	ద్దర్ల గ
Jail— White residents		н	01	н	:		8	н	:			:	œ
White non-residents			: :		: :		: :		: H			: :	. <b>.</b>
Colored non-residents		:	:	:	:	:	:	:	:	:	:	:	:
White residents	н			H	:	:	:	:	:		:	:	81
Colored residents		H						. <b>.</b>	. 4			H	12
Bay View Asylum— White residents.	: 00 :	31	. 0	. 72	37	:	43	8		8	52	: % :	375
Colored residentsSydenham Hospital	∞ m	27	22.4	25. I	8 -	<b>∞</b> :	ম :	8	8	27	8 4	91	300
Total	289	275	317	285	82	249	285	254	259	252	238	251	3,240
Coroners' inquestsAutopsies	147	9	135	131	101	114	123	108	84	117	110	122	1,426 65

TABLE VII Number

TABLE VII—Number	of	Deaths		ding.	to Oc	According to Occupations During the	ous D	uring	the Y	Year 19	1914		
Occupations.	Jan.	Feb	Mar.	.linqA	May.	June.	July.	.BuA	Sept.	Oct.	.voV	Dec.	Total.
Artists and designers			I		1	н	н				-		V
	∞	Ι,	I	4	:		3	7		6	. (1	7	. 23.
Barbers and wigmakers	01 .	9	v,	ω.	9	04	4	н	8	4	:	4	300
Bookkeepers and clerks	491	285	7 02	4 0	7 7	4 0	7 2	:∞	0 5	4 F	2:	4 ;	<u>প্</u> ব পূ
Brassfinishers	н	:		ı		\	? :	1	!	? :		1	3 0
Bricklayers and masons	I	3	Ŋ	က	-	8	8	:	8	н		8	26.
Butchers	н	ı	က	Ŋ	N	(1)	က	н	61	(1	61	:	24
Cabinetmakers	(1)	н	н	1	8	4	010	4	ı	:	71	-	22
Carpenters and builders	ĸ.	6	15	15	17	Ŋ	∞	6	11	7	7	II	119
Cigarmakers and dealers	4	0	v	e	N	4	н	4	01	Ŋ	ĸ	9	43
	:	:	:	:	:	:	:	:	:	:	3	8	ß
Confectioners and iruiterers	: 1	:0	:	:	: '	:	:	:	:	:	:	:	:
Diemakers	'n	0	ο	6	_	r.	m	^	က	I	^	6	8
	0	91	6	12	9	4	13			. 12			125
	:	:	3	:	:	H	· :	0	. 1	:	<b>H</b>	8	î
Dyers and scourers	:	:\	:	:	<u>:</u>	:	:	:	:	:	:	:	:
Flectrical workers	(1	0	6	:	:	:	Н	0	:	н	:	:	15
Engineers and machinists	0	01	II	6	0	II	9	∞	2	0	9	13	112
Firemen	:	ı	:	3	N	<u>ب</u>	:	(1	н	(1)	4	н	19
Crocers	•	: '	:	: ,	:	<b>-</b> (	:	:	: '	:	:	:	H
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Jeweiers and Watchinianers	4	- : :	-	<b>-</b>	~ ~	_	<b>-</b>	-	- : :	_	01	-	12

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TABLE VII (Continued)-Number of Deaths According to Occupations During the Year 1914,

IABLE VII (Continued)-	Inamoer	lo se	Dearns		coras	01 89	7000	Accoraing to Occupations During the		ng the	rear	1914.	
Occupations.	Jan.	Feb.	Mar.	.lingA	May.	June.	July.	.SuA	Sept.	Oct.	.voV	Dec.	Total.
j.	76	d	1	1	1		-		-		,		
L'aborers	8;	8 (	105	8	20	7.	8,	8	7	72	22	7,	S.
Laundrymen and laundresses	-	0	01	13	2/	=	O.	13	4	S	01	_	120
L'awyers	н	-	m	4	(4)	4	(1)	:	m	N	01	:	77
Liquor dealers and barkeepers	S	_	e	0	0	(1	_	H	(1)	w,	m	N	42
Merchants	14	<b>x</b>	13	0	2	0	4	~	0	0	II	12	0
Mill operatives	н	(1	:	- ::	H	n	7	н	н	н	H	0	15
Moulders	n	4	w	8	Ŋ	n	3	4	N	H	н	4	37
Nurses	4	н	4	:	(1	-	<u>س</u>	(1)	:	-	:	:	<b>∞</b>
Oyster shuckers		(1	8	H	4	:	:	:	_ :	н	-		II
Painters and varnishers	4	6	6	9	00	7	4	(1)	7	7	Ŋ	(4)	53
Paperhangers and decorators	:	н	:	:	:	۳,	(1	1	-	7	:	н	2
Physicians and dentists	:	8	4	3	4	, w	∞	8	8	0	6	0	æ
Planing mill workers	:	:	:	:	:	:		:	-:	:	:		:
Plasterers and lathers	H	н	e	:	0	:	4	:	н	N	ı	0	14
Plumbers and steamfitters	4	3	9	4		7	4	:	8		н	н	3
Policemen and watchmen	0	9	9	(1	4	ນ	4	4	4	8	4	3	<b>5</b>
Printers and bookbinders	н	:	H	ı	9	8	H	0	4	-	'n	-	83
Religious	8	н	3	<u>ب</u>	4	(1	<u>س</u>	-	H	6	- :	H	77
Salesmen and salesladies	2	7	12	2	'n	∞	א	Ŋ	<u>س</u>	'n	∞	0	8
School teachers	m	3	н	9	3	(1	(1)	4	4	7		(1	33
Seamstresses	0	9	4	4	4	(1	4	01	-	7	25	61	2
Servants	8	21	23	8	8	22	8	8	- 81	9	12	25	8
Shoemakers and harnessmakers.	4	9	∞	3	н	н	က	3	מ	4	8	7	\$
Solicitors and collectors	9	9	64	8	8	н	8	н	4	4	4	81	31
Steam railway employees	п	_	9	Ŋ	4	н	4	9	3	01	8	13	Š
Stevedores	6	4	2	4	ĸ	H	7	'n	4	4	е	4	8
Stonecutters and marbleworkers.	_	9	4	H	(1	:	-	<del>:</del> ::		_ :	H	6	14

TABLE VIII-Showing Deaths According to

	Jan	1.	F	eb.	Ma	rch.	Ap	ril.	Ma	ay.
Social Condition.	М.	F.	M.	F.	М.	F.	М.	F.	M.	F.
White.										
Single	170 153  62 2 5	133 111 119 	155	107 113 114  1	202 188  78 	139 117 130 	144 157  48 	118 92	145 156  43 3 4	116 85 87
Total	392	364	372	336	475	387	355	318	351	289
Colored.										
Single	58 38  11 	57 23 39  5	68 42  14 	43 36 30 	69 45  22 	49 31 48  2	66 39  18 2 3	66 39 29 	54 35  18 2 3	56 34 23
Total	109	124	125	110	137	130	128	136	112	113

Social Condition During the Year 1914.

. Ju	ne.	Ju	ıly.	A	ug.	Se	ept.	0	ct.	No	ov.	D	ec.	
M.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	Total.
137 118  34 1	92 86 84	207 111  48	151 84 62 	194 110  31	150 72 70  2	152 135  26	109 87 61	112 123  40 	118 87 66 	159 115  41 5	114 85 85  2	133 155  58 3	106 104 118  2	3,351 2,825 1,088 570 30 50
<b>29</b> 2	262	368	300	340	294	319	257	278	272	321	286	356	330	7,914
70 31  II	38 25 24  I	76 39  14 1	50 31 17 	63 30  9 1 2	53 25 26 	65 32  9 1 2	44 21 18  1 2	50 30  13	43 21 24  I	59 34  14	35 24 27  I	45 37  10	41 25 34 	1,318 767 339 163 11 39
114	89	130	99	105	106	109	86	96	90	108	87	94	100	2,637

	Total.	ο · · · · · · · · · · · · · · · · · · ·
	December.	
	November.	8
	October.	g
1914.	September.	од н . <b>мо</b> н и н . м
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Cause	April.	φ : : α α α α α α α α α α α α α α α α α
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from	February.	7 H 72400 H &H 4
ths	January.	0
Table IX—Number of Deaths from all Causes During the Year	Diseases.	I—General Diseases.  I. Typhoid fever  I. Typhoid fever I. Typhus fever I. Ralapsing fever I. Malaria I. Malaria I. Milany fever I. Asiatic cholera I. Milany fever I. Asiatic cholera I. Leprosy I. Plague I. Leprosy II Leprosy II Le

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					Tumors.		the peritonaeum, intestines, rectum the female genital organs		ا ا	: :	: : : :
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Rabies Tetanus Mycoses Pellagra	Beriberi Tuberculosis of the lungs. Acute miliary tuberculosis.	Fuberculous meningitis Abdominal tuberculosis	White swellings  Tuberculosis of other organs.  Disseminated tuberculosis	Rickets Syphilis	Concers and Other Malignant		1 T	- <del>-</del>	£ 6	Acute articular rheumati Chronic rheumatism and	Scurvy Diabetes Exophthalmic goi
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TABLE IX (Continued)—Number of Deaths from all Causes During the Year 1914.

	Total.	8 4 6 5 1		444	, 4 8 V 4 8	8%	? <b>?</b> :
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IABLE IA (Continued)—Number of Deaths from all Causes During the Year 1914.	Diseases.	53. Leuchaemia 54. Anaemia, chlorosis 55. Other general diseases 56. Alcoholism, acute or chronic 57. Chronic lead poisoning 58. Other chronic occupation poisonings 59. Other chronic poisonings 50. Other chronic poisonings	II—Diseases of the Nervous System and of the Organs of Special Sense.	61. Simple meningitis  Epidemic cerebral spinal  62. Locomora ataxia  63. Other diseases of the sain ord		without arralysis of me	

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71. Convulsions of infants. 72. Chorea 73. Hysteria 74. Other diseases of the nervous system. 75. Diseases of the eyes and their annexa. 76. Diseases of the ears III—Diseases of the Circulatory System.	77. Pericarditis 78. Acute endocarditis 79. Organic diseases of the heart. 80. Angina pectoris	81. Diseases of the arteries, atheroma, aneuryism. etc	• •	phangitis, etc.)	IV—Diseases of the Respiratory System.	86. Diseases of the nasal fossae 87. Diseases of the larynx 88. Diseases of the thyreoid body 89. Acute bronchitis 90. Chronic bronchitis 91. Broncho-pneumonia 92. Pneumonia 93. Pleurisy 94. Pulmonary congestion, pulmonary apoplexy.

TABLE IX (Continued)—Number of Deaths from all Causes During the Year 1914.

	Total.	22 4	6 7 1 18	264 78	78 118 7	92
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	March,	: H : H	нн а	OHH	. 3 0 6 :	<u>.</u> 2
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10	January.	. 7 - :	H : : :	€ 0.00	. 444 :	<u>-</u>
this in a second in the leaves to the second	Diseases.	95. Gangrene of the lung. 96. Asthma 97. Pulmonary emphysema 98. Other diseases of the respiratory system, tuberculosis excepted.	99. Diseases of the mouth and annexa		100. Intestinal parasites 108. Appendicitis and typhlitis 109. Hermas, intestinal obstructions 110. Other diseases of the intestines 111. Acute yellow atrophy of the liver 111. Hydatid tumor of the liver	. •

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114. Piliary calculi 115. Other diseases of the liver 116. Diseases of the spleen 117. Simple peritonitis (nonpuerperal) 118. Other diseases of the digestive system, cancer and tuberculosis excepted	VI—Nonvenereal Diseases of the Genito-Urinary System and Annexa	119. Acute nephritis		scess, etc.  Diseases of the prostate.  Nonvenereal diseases of the male ger	organ Uterin Uterin	<ol> <li>Other diseases of the uterus</li></ol>		VII—The Puerperal State.	134. Accidents of pregnancy

TABLE IX (Continued)—Number of Deaths from all Causes During the Year 1914.

	Total.	35 15 15	,	87.78		<b>8</b> 2 ⋅ ₹	
	December.	3	1	<del>нын :</del> :	,	0 0	` <u>: :</u>
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	October,	. 0 0		о н : :		:	
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•	August.	7		mm : 11		н	
	July.			<u> </u>		H	
}	June.	33		6 : H		H	
	May.	3 3 1		: Н : н		н	
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	March.	1 4 2 · · · ·		4 H W :		4	- H
	February.	. d &		9 m 9 m			
1	January.	1 1 1	1	H - : :		N -	1 : :
	Diseases.	136. Other accidents of labor	_	142. Gangrene 143. Furuncle 144. Acute abscess 145. Other diseases of the skin and annexa	IX—Diseases of the Bones and of the Organs of Locomotion.	146. Diseases of the bones, tuberculosis excepted.  147. Diseases of joints, tuberculosis and rheumatical excepted.	148. Amputations 149. Other diseases of the organs of locomotion.

X—Malformations.	_													
150. Congenital malformations (stillbirths not included)	6		7	<u></u>	0	∞		01	12	4	12	0	85	
XI-Diseases of Early Infancy.					<u>'</u> -									
151. Congenital debility, icterus and sclerema 152. Other diseases peculiar to early infancy 153. Lack of care	47	<u> </u>	<del>2</del> 4 :	55	ο <sub>ο</sub> .	13	56 15	74 13	<sup>5</sup> 6 ::	111	04 14 1	37	579 145 4	
XII—Old Age.														
154. Senility	- <u>8</u> -	17	20	13	17	17	15	6	11	01	11	12	170	
XIII—Affections Produced by External Causes.														
155. Suicide by poison 156. Suicide by asphyxia 157. Suicide by hanging or strangulation 158. Suicide by drowning 159. Suicide by firearms 160. Suicide by prearms 161. Suicide by jumping from a high place 162. Suicide by crushing 163. Suicide by other means 164. Poisoning by food 165. Other acute poisonings 166. Conflagration 167. Burns (conflagration excepted) 168. Absorption of deleterious gases (conflagra-		:: ::: :	w4::4H:::0	<u> </u>	ман	ОН Р Н : : н о н о н о н о н о н о н о н о н о	0: 10:	4HHHH	400	w:::wH:::/4	<u>каннн н ок</u>	<u>гин н н н н н н н и и и и и и и и и и и </u>	20 8 4 4 4 1 1 1 20 1 20 1 20 1 20 1 20 1 20	
tion excepted)	<u>~ ~ ~ </u>	<del>≅</del> :	ı	- 7	<u>000</u>	10	12	<u>6</u>	1 S	4 4	<del>-</del> :	<u>0 60</u>	8,4	

TABLE IX (Continued)—Number of Deaths from all Causes During the Year 1914.

	Total.	מע	4 00	9	108	4 :			13 23	120
	December.	:	:::	: :	^	: :	::	: : <b>-</b>		: 6
	November.	I			00	: :	: :			
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	August,	:	:∞ :		14	: :	: 10		7	
	July.	н	H 00	: H	<b>∞</b>	· :	: 4	: H H	<u>د</u>	: 0
	June.	:	: 41	::	4	<del>-</del> :				
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	February.	:	н и	. 0	8	: :		: : 0	<del></del>	<u> </u>
	January.	ı	:∞	: H	10	: :	: :			: <del>-</del> -
	DISEASES.	70. Traumatism by firearms	ments Traumatism		Traumatism road, lands	76. Injuries by animals	78. Excessive cold 79. Effects of heat	HESE	Homicide by c	Fractures (ca

	 IO	,551
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		897
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		865
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		<u>g</u>
	: : 0	. 989 943 1129 937 865 757 897 845 771 736 802 880 10,551
XIV—III-Defined Diseases.	189. Cause of death not specified or ill-defined 2 2 1	Total

TABLE X—Showing Number of Deaths from Tuberculosis, Bronchitis, to Age, Sex

	<u>.</u>	Pı Tul	ılmor percu	ary losis.			o <b>f</b> .				
Ages.	White.		Colo	red.		Wh	ite.	Colored.			
	М.	F.	М.	F.	Total.	М.	F.	M.	F.	Total.	
Under three months Bet. 3 and 12 months Bet. 1 and 2 yrs Bet. 2 and 3 yrs Bet. 3 and 4 yrs Bet. 4 and 5 yrs	1 2 2 1	3 	3 1 1 1	 I 3 I I I	1 7 9 3 2 2	1 7 6 5 4 3	1 3 4 2 4 1	1 2 7 4	I 2 2 I	4 14 19 8 12 6	
Total under 5 yrs	6	4	7	7	24	26	15	14	8	63	
Bet. 5 and 9 yrs  Bet. 10 and 14 yrs  Bet. 20 and 24 yrs  Bet. 25 and 29 yrs  Bet. 30 and 34 yrs  Bet. 35 and 39 yrs  Bet. 40 and 44 yrs  Bet. 50 and 54 yrs  Bet. 55 and 59 yrs  Bet. 60 and 64 yrs  Bet. 65 and 69 yrs  Bet. 70 and 74 yrs  Bet. 70 and 74 yrs  Bet. 80 and 84 yrs  Bet. 80 and 84 yrs  Bet. 90 and 94 yrs  Bet. 90 and 94 yrs  Bet. 105 and 104 yrs  Bet. 105 and 109 yrs  Bet. 105 and 109 yrs  Unknown age	39 51 57 58 58 62 39 44 37 23 9 11	26 45 42 28 32 27 14 11 16 13 6 4	2 1 13 344 227 266 31 233 100 100 4 2 1 1	5 6 20 29 333 16 20 21 122 8 2 2	10 68 159 159 126 141 133 88 73 65 43 18 6 4	3 2 2 3 4 4 1 1 2 2 2 2	3 4 4 3 5 2 2 1 1 2 2 2 1 2	7 2 5 1 3 4 1 1 6 2 2 1	7 4 4 2 9 9 3 2 2 1 1 1 1	20 12 13 19 9 11 8 14 7 6 2 5 3 4 1 2 	
Total	467	278	215	185	1,145	63	46	50	40	199	

Broncho-Pneumonia and Pneumonia, During the Year 1914, According and Color.

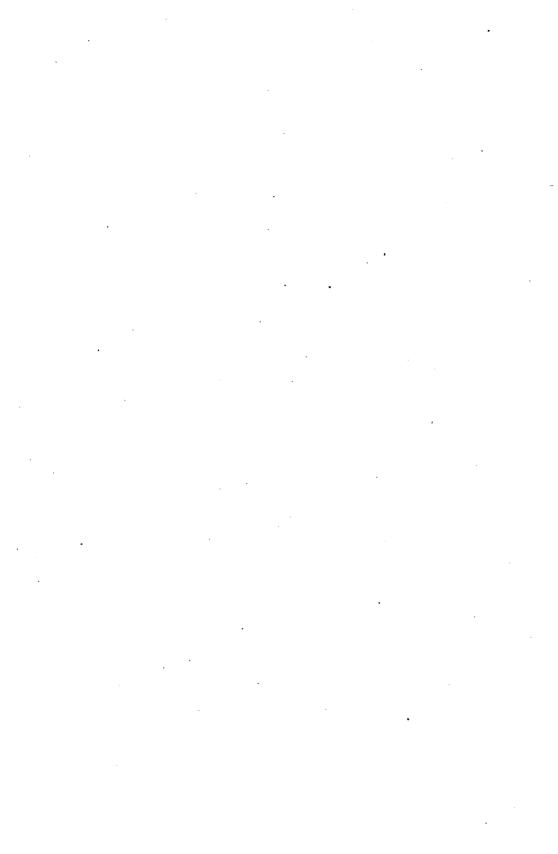
	Br	onch	itis.		Br	onch	o-Pn	eumo	nia.	Pneumonia.				
Wh	ite.	Colo	red.		Wh	ite.	Colo	ored.		Wł	ite.	Cole	ored.	
М.	F.	М.	F.	Total.	М.	F.	М.	F.	Total.	М.	F.	M.	F.	Total.
9 8 2 1	9 8 3 2 2 1	4 7 4 1 1	2 3  I I	24 26 9 5 4	29 48 36 10 2	30 49 23 8 4	14 18 22 3 5 2	9 16 13 6 1	82 131 94 27 12 7	6 10 16 5 4	4 11 9 2 2	3 7 8 2 3 2	4 10 6 2 1	17 38 39 11 10 3
20	25	17	7	69	127	115	64	47	353	41	28	25	24	118
I 2 3 8 4 7 7 3 1	I I I I I I I I I I I I I I I I I I I	3 3 1 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1	33 11 11	2 1 2 4 16 16 7 56 16 9 13 6 3 	41 2 32 31 55 57 77 12 72 32 	5 i 2 2 4 2 2 9 10 11 24 9 4 10 3 3	4 I I I 2 2 2 2 4 4 2 2 I I	2 2 2 2 1 I I 2 2 2 2	15 3 3 6 4 3 7 7 13 13 13 17 24 21 39 18 8 13 6	4 1 1 7 2 2 9 9 9 7 7 14 15 21 19 26 18 23 11 1 1 1	5 2 2 8 8 7 7 3 3 8 10 6 6 9 18 15 144 18 1 1	3 6 5 7 12 9 12 11 8 6	1 1 1 5 8 8 9 5 6 6 3 3 4 4 4 8 8 3 6 6 3 1 1	111 4 23 23 26 29 35 28 41 42 42 32 19 13 2
56	58	30	15	159	198	211	92	72	573	244	181	I <b>I 2</b>	91	628

1875 Inhabitants. Births to 1,000 Rate of Still Table XI-Showing Comparison of Deaths Due to All Causes and Those to Communicable Diseases, from Still Births. 222800821280000777222808 8888484688878777222808 Death Rate. Still Births. 7,910 6,733 6,733 6,733 6,733 6,733 8,921 8,923 8,339 8,339 8,339 8,339 8,339 8,339 8,339 8,339 Exclusive of from All Causes, Total Mortality 3,429 3,640 3,640 3,385 3,386 3,386 3,367 3,367 3,367 3,367 3,388 3,367 Five Years of Children Under Enteritis, Under Five Years.\* Diarrhea and Dysentery. 1914, Inclusive. Croup. branous Croup. Pseudo-Mem-2 Diphtheria and Whooping Cough. 5% 44% 615 5 588 8 28 41 4888 88 Scarlet Fever. Measles. Typhoid Fever, 332,313 347,142 352,668 370,696 378,993 395,899 104,498 Population. YEARS.

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<b>26 26 27 27 27 27 27 27 27 27</b>	
60 40 58 60 88 60 80 80 80 80 80 80 80 80 80 80 80 80 80	
10,301 9,919 10,385 10,152 10,152 10,700 10,479 10,818 10,695 10,753 11,190 10,753 10,435 10,435 10,435 10,441 10,441 10,441 10,441	
4,026 3,728 3,339 3,339 3,339 3,337 3,102 3,102 3,103 3,103 3,337 3,307 2,307 2,732 2,732 2,732	
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479,907 493,147 556,398 541,000 524,000 524,417 524,417 534,443 533,465 544,481 544,481 559,529 564,545 564,545 564,545 574,577	
8895. 8897. 8897. 1900. 1901. 1903. 1905. 1906. 1907. 1907. 1910.	

\*The figures on diarrhocal diseases in children under five years of age are not complete, for the reason that to the year 1882 only those dying of "cholera infantum" were so classified, and from and including the year to conform with the International System of Classification, only those under two (2) years of age are included. prior 1906

Norr.—In the above table the item "population," which is estimated, has been changed from and including the year 1900, so as to conform with the figures used by the United States Census Bureau. Previous to the census of 1910 the population for the inter-censal years, from 1900 on, was estimated on the assumption that the same, or more, average increase each year was maintained as was the previous decade; but the census for 1910 showed differently, and, therefore, the estimates of population and the death rate for each year has been adjusted accordingly.



## ANNUAL REPORT

OF THE

## DIVISION OF BACTERIOLOGY



## Report of the Division of Bacteriology.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

DEAR SIR:

I hereby respectfully report on the work performed in the Division of Bacteriology of the Sub-Department of Health during the year ending December 31, 1914.

BACTERIOLOGICAL EXAMINATION OF WATER SUPPLY.

During the past year, as heretofore, the drinking water furnished to the city has been treated by means of calcium hypochlorite for the purpose of destroying the various pathogenic intestinal bacteria. The use of aluminum sulphate has also been practiced to bring about a preliminary sedimentation of the grosser particles in the water in order to precipitate a certain percentage of the bacteria and render the use of calcium hypochlorite more effective in the clearer super-The calcium hypochlorite has been added to natant fluid. the water under the direction of Mr. Robert L. Clemmitt, Acting Water Engineer, this being added to the Gunpowder supply at the effluent of Lake Montebello and to the Jones Falls supply at the gate chamber at Lake Roland. The aluminum sulphate has only been added to the water derived from the Gunpowder supply, the material being added at the Montebello influent.

TABLE No. 1—Record of Available Chlorine in Parts per Million Used in Treating the City Water.

Loch Raven Supply-	Parts per Million.
January 1*	
May 17	
May 18	
May 22	
May 23	
May 25	
June 21	
June 25	
July 2 (by-passing)	1.50 2. <b>0</b> 0
July 8 (by-passing)	2.00
July 9	_
July 11	
- · · · · · · · · · · · · · · · · · · ·	
July 13	
July 27	
July 28	-
July 31	
August I	
August 3	
August 5	
August 6	
September 2	
September 3	
September 7	2.66
September 9	
September 11	1.75
September 12	1.50
September 18	1.00
September 19	1.66
September 20	2.00
September 21	1.50
September 22	2.20
September 23	2.50

<sup>\*</sup>Each date indicates the day upon which the given amount of available chlorine was used and this same amount continued daily until the next date given. It should be understood, therefore, that calcium hypochlorite was used daily during the entire year.

TABLE No. 1 (Continued)—Record of Available Chlorine in Parts per Million Used in Treating the City Water.

Loch Raven Supply-						
September 26		1.50				
September 28		2.00				
September 30		1.50				
October 30		2.50				
October 31		1.50				
November 2		2.00				
November 4		1.50				
November 8		2.45				
November 12		1.50				
December 9-31		2.00				
Lake Roland Supply—						
January I		2.00				
June 27		2.25				
June 28-Dec. 31	-	2.50				

From the above table it can be seen that the amount of available chlorine per million parts of water used in treating the Gunpowder or Loch Raven supply has varied between a minimum of 1.0 and a maximum of 3.0 parts. The amount used in the majority of cases, however, has varied between 1.5 and 2.0 parts per million, and larger amounts than these have only been added occasionally. During the first half of the year 2.0 parts were used in the Lake Roland supply and during the latter half of the year 2.5 parts were used.

The use of aluminum sulphate has been continued during the year whenever the turbidity of the influent at Lake Montebello rose to 30 or over. This is added in a small mixing chamber at the gate house at Lake Montebello and is mixed with the water as it flows through the gate chamber into a conduit which leads out into the upper portion of the lake. This produces a marked sedimentation of the solid particles in the water and causes a clear water to flow into the effluent

from Lake Montebello at the lower portion of the lake, which then passes through a portion of the gate chamber into the conduit leading into Lake Clifton. The preliminary storage and sedimentation of the water in Lake Montebello therefore offers a better opportunity for the treatment of the water by calcium hypochlorite after sedimentation, and the calcium hypochlorite is added at the gate chamber after the water has passed out of Lake Montebello and is flowing into the conduit leading into Lake Clifton.

During January the average amount of aluminum sulphate added was .679; the minimum was .615 and the maximum was .735. No aluminum sulphate was added during February, March and April, and it was only added on May 31 during this month—the amount being 1.232. During June the average was .877, but the minimum and maximum are not available. During July the average amount of aluminum sulphate was 1.819; the minimum being .721 and the maximum 2.065. During August the average amount was 1.045; the minimum .664 and the maximum 1.935, while during September .672 was added on only one date. In October the average was .764; the minimum .656 and the maximum 1.049. During November the average was .606; the minimum being .365 and the maximum .864, and during December the average from two days' treatment was .846.

No aluminum sulphate was added to the water derived from Lake Roland, owing to the impossibility of adding the alum before the treatment with calcium hypochlorite.

TABLE No. 2-Loch Raven System.

1		Exam- acteria		Percentage of Positive Colon Tests.				
Months—Water	Number of Exinations.	Average Bacteria per c. c.	Percentage of Bacterial Reduction,	0.01 c. c.	0.I c, c.	I C. C.	IO C. C.	
January Raw water Storage City taps	15 26 48	14,000 2 27	99.9 99.8	16 0	66 0	88 0 2	100 0 2	
February Raw water Storage City taps	18 21 15	7,000 21 80	99.7 98.9	21 0	68 0 	84 0 0	100 0 20	
eq:march	13 24 35	20,000 29 225	99.8 98.9	16 0	25 0 	83 0 0	100 0 3	
April	9 20 45	5,500 110 3,700	98.0 32.7	14 0 	14 0 	28 0 0	57 0 2	
$\label{eq:may.state} \textbf{May} \left\{ \begin{cases} \text{Raw water} \\ \text{Storage} \\ \text{City taps} \end{cases} \right.$	11 24 51	80,000 1,600 12,000	98.0 85.0	15 0	31 • 0	69 4 4	85 31 9	
June Raw water Storage City taps	14 24 42	2,000	83.3	20 0	53 o	80 4 3	100 15 17	
July	13 13 27		97·4 99·9	29 0	71 0 	88 - 12 7	38 22	
$August \begin{cases} Raw \ water \\ Storage \\ City \ taps \end{cases}$	24 27 30	19,500 1,800 75		29 0	71 0	87 11 3	100 29 · 13	
$September \begin{cases} Raw \ water \\ Storage \\ City \ taps \end{cases}$	15 15 23	500	88.9 98.5	5 0	44 0	78 13 0	100 39 17	
$ \begin{array}{lll} \text{October.} & & \begin{cases} \text{Raw water} \\ \text{Storage} \\ \text{City taps} \\ \end{cases} \\ \end{array} $	23 22 33	7,900 1,000 50	87.3 99.4	17 0	<i>7</i> 9 o	100 8 3	100 35 15	
November $ \begin{cases} Raw \ water \\ Storage \\ City \ taps \end{cases} $	14 13 30	400	99.8 99.9	13 0	27 0	60 4 0	93 9 14	
December { Raw water Storage City taps	13 18 12	275	99.9 99.4	33 0	67 <b>o</b>	78 0 0	100 11 0	

TABLE No. 3-Lake Roland System.

• •	of Exam- Bacteria		Bac-	Percentage of Pos- itive Colon Tests.				
Months—Water	Number of Exam inations.	Average Bact per c. c.	Percentage of Bacterial Reduction.	0.01 C. C.	0.I c. c.	I C. C.	TO C. C.	
January Raw water Storage City taps	25 25 47	90,000 1,400 50	98.5	12 0	64 0	100 0 0	100 12 0	
February { Raw water Storage City taps	21 20 15	25,000 3,900 85	84.4 99.7	0 0	13 0	56 4 0	91 30 13	
$\begin{tabular}{lll} \begin{tabular}{lll} March & & & \\ Storage & & \\ City & taps & & \\ \end{tabular}$	22 22 36	4,400 3,600 1,000		0 	4 0	35 0 0	81 4 0	
April	19 22 45	5,500 2,100 4,500	61.8 18.2	0 0	0 <b>0</b>	14 0 0	76 9 2	
$\label{eq:may.state} \text{May} \dots \left\{ \begin{array}{l} \text{Raw water} \\ \text{Storage} \\ \text{City taps} \end{array} \right.$	17 25 51	21,000 11,000 12,500	47.6	6 0 	23 0	53 4 2	88 24 11	
June { Raw water Storage City taps	25 25 42	14,000 1,200 70	91.4 99.5	0 0 	16 0 	40 24 3	68 36 14	
July	20 22 26	20,000 650 50	96.8	20 0	48 0 	84 27 0	100 50 26	
$August \begin{cases} Raw \ water \\ Storage \\ City \ taps \end{cases}$	13 14 28	99,000 1,100 950	98.9 99.1	25 0	75 5	95 40 0	100 65 11	
$September. \dots \left\{ \begin{array}{l} Raw \ water. \dots \\ Storage. \dots \dots \\ City \ taps \dots \end{array} \right.$	19 20 24	25,500 2,800 125	89.0 99.5	20 0	60 .24	90 48 0	100 67 0	
October { Raw water Storage City taps	24 25 32	4,200 650 50	84.5 98.8	24 15	48 59	68 74 3	100 96 6	
$November \begin{cases} Raw \ water \\ Storage \\ City \ taps \end{cases}$	20 17 30	16,000 1,700 65	89.4 99.6		40 33	67 37 0	92 62 13	
December { Raw water { Storage City taps	23 24 12	29, <b>00</b> 0 3,800 7,800	86.9	9 0 	56 0 	96 0 0	100 56 0	

## BACTERIAL REDUCTION EFFECTED BY THE TREATMENT OF THE DRINKING WATER.

Tables Nos. 2 and 3, which precede, indicate that there are two distinct supplies of drinking water for the city, but this is not strictly correct. As stated on page 543 of the annual report for 1913, the Gunpowder water derived from Loch Raven furnishes the city with 60.2 per cent, of the total amount of water, and 28.5 per cent. of the water consists of a mixture of the Gunpowder water from Loch Raven and Jones Falls water from Lake Roland: 2.2 per cent, is pure, unmixed Jones Falls water. Of the mixed Gunpowder and, Jones Falls water 38.1 per cent. consists of Gunpowder water and 61.9 per cent. consists of Jones Falls water. The table, therefore, referring to the taps from the so-called Lake Roland system gives the data from the wards either supplied by this mixture of Gunpowder and Jones Falls water or from the 2.2 per cent. of unmixed Jones Falls water supplied to the Upper Service. These figures are taken from the table furnished in last year's report.

The results of sedimentation by means of aluminum sulphate and disinfection by means of calcium hypochlorite of the Gunpowder supply and of disinfection by means of calcium hypochlorite of the Jones Falls supply are shown in Tables Nos. 2 and 3 by monthly averages, which give the comparative reduction in the storage reservoirs and city taps as compared to the raw, untreated water in Loch Raven and Lake Roland.

An examination of Table No. 2 shows that the untreated water in the impounding reservoir known as Loch Raven shows a very high bacterial average as compared with the sedimented and treated water. The averages for the storage reservoirs for the various months of the year show a marked reduction in the bacteria, both during the months when aluminum sulphate was used and when this chemical was not used. The bacterial reduction in the water from the taps is also

shown in the table and is usually very satisfactory. During the months of April, May and December there is an increase of the bacteria from the tap water as compared to the water in the storage reservoirs. This is probably due to the condition known as after-growths, which consist in the development of large numbers of resistant, spore-bearing organisms. These bacteria, however, take no part in the production of the water-borne diseases and are, therefore, harmless in their nature. The bacterial reduction in the city taps, with the exception of the after-growths, approximates the results obtained from the various processes of water filtration.

The percentage of positive colon tests for the storage water and that from the city taps as compared to the raw, untreated water shows a marked contrast. The tests from the raw water show a large percentage of positive tests in 0.01, 0.1, 1 and 10 cubic centimeters, whilst the water from the storage reservoirs and the city taps shows either an entire absence or a small percentage of positive tests even in 1 cubic centimeter of water. There was not entire freedom of colon bacilli, however, from 10 cubic centimeters, since at times fairly large percentages of positive tests are shown both from the storage reservoirs and the city taps.

An examination of Table No. 3 for the Lake Roland system shows a very high bacterial average in almost all of the months of the year for the raw, untreated water. The bacterial reduction in the water from the storage reservoirs and city taps is variable and the results of the treatment of this portion of the water supply cannot be considered as perfectly satisfactory. This is probably owing to the fact that no preliminary sedimentation by alum can be carried out and we have been compelled to depend entirely upon the use of calcium hypochlorite for the purification of this water.

The percentage of positive B. coli tests in the raw water shows a number of high percentages both in 0.01 and 0.1 of a cubic centimeter, but the colon bacillus appears only in the storage reservoirs in 0.1 of a cubic centimeter. Its percentage is variable in 0.1, 1 and 10 cubic centimeters, but in the water from the city taps it is practically absent even in 1 cubic centimeter of water and only appears in variable and usually small percentages in 10 cubic centimeters.

It has been somewhat unfortunate that it has been necessary to mix the Jones Falls water with the water supplied from the Gunpowder system, since the results in the disinfection of the latter supply have been far more satisfactory.

The figures for the raw water and the storage water found in Tables Nos. 2 and 3 have been kindly furnished by Mr. J. Bosley Thomas, director of the laboratory of the Water Department.

Table No. 4—Typhoid Fever in Baltimore, January, 1906, to December, 1914, Showing Decrease in Morbidity and Mortality Since the Use of Hypochlorite of Calcium.

192.8 Average of Five Years, 1906-1910. 8.00 6.88 8.49 11.20 15.40 15.00 15. Deaths. 1,403 446883518845115 7112346115 Case Incidence. 30 0 7 co 4 tis 0 8 2 8 0 0 Deaths. 1914. 9225145466674 757 Case Incidence. 136 Deaths. 1913. 1,163 Case Incidence. 136 971198833971 Deaths. 1912. **7% % % % % % % %** 8 8 7 8 7 % 1,083 Case Incidence. 154 Deaths, 1911. 25 E 8 4 8 4 8 8 8 4 5 9 2 8 1,201 Case Incidence. 235 Desths. 1910. 1,891 Case Incidence. 136 Deaths. 1909 1,069 8888845758698 Case Incidence. & & Deaths. 1908. 1,426 4%%44445%**%**%88 Case Incidence. 3 x 9 7 x 9 8 8 4 4 £ 7 230 Deaths. 1907. 1,420 Case Incidence. 2001224488810 183 Deaths. 1906. 1,209 Case Incidence. Total.. fanuary..... May..... une August..... February..... March.... April..... uly..... September... October.... December... November... Months.

CHART No. 1.

- · · ; · . · · . 

REDUCTION IN TYPHOID MORBIDITY AND MORTALITY.

The above table (No. 4) shows the cases and deaths of typhoid fever from 1906 to date and the gradual tendency towards an increase of typhoid fever which ended in the outbreak of 1010 can be seen upon examining this table. About the first of June, 1911, we began to use calcium hypochlorite for disinfecting the drinking water, and this table shows that the cases and deaths of typhoid fever have been gradually reduced up to the present time, with the exception of the months of July. August and September of 1913. When the amount of available chlorine was increased about the middle of September from 1.5 to 2.0 parts per million parts of water the number of typhoid cases rapidly decreased. The results for 1914 are particularly gratifying, since there were only 757 cases and 130 deaths; these numbers being much lower than any other yearly total found in the table. This result is probably due to the fact that especially during the summer and fall amounts of available chlorine varying between 1.5 and 2.5 were used.

Chart No. I shows the number of reported typhoid cases for the years from 1910 to 1914, inclusive, and it also indicates the average number of cases for the years 1906 to 1910, inclusive. The legend shows the colors, which represent the various years and the number of typhoid cases as shown by the height of the various columns in the chart; the actual numbers being placed at the tops of these columns.

The use of calcium hypochlorite in treating the city water was begun in June, 1911. On comparing the green line representing the average number of typhoid cases for the five years previous to the year when hypochlorite was used with the various lines indicating the years 1911, 1912, 1913 and 1914 it can be seen that the number of typhoid cases month by month during these latter years was less than the average for the five preceding years, although the population has steadily increased. During the months of July, August and September

of 1913, however, there was a decided increase in the number of typhoid cases. On September 18 the hypochlorite for the Gunpowder supply was increased to 2.0 parts of available chlorine per million parts of water, and it can be seen that in October, November and December there was a marked drop in the number of cases.

This chart also shows the decided outbreak of typhoid fever in July, August, September, October, November and December, 1910; the numbers for the various months being indicated by the black line. In 1911 the number of cases for the first five months of the year showed an increase, even over the cases during these months for 1910. In June, 1911, as mentioned above, the use of hypochlorite was instituted in the treatment of the Baltimore drinking water, and the marked contrast between the cases for 1910 and 1911 for the rest of the months of the year is clearly indicated by the black and red lines.

Chart No. 2 shows the number of typhoid cases reported for the various months of each year since 1910 and also the average number of cases reported month by month from . 1906 to 1910, inclusive. The large number of cases during the summer months of 1910 is clearly indicated and the decrease in the number of reported cases since the use of calcium hypochlorite in 1911 is also shown. There is but one break in this result, however, since some of the columns for 1013 are higher than those for the other hypochlorite years. This is due to the failure to use enough hypochlorite during July, August and September, since only 1.0 part of chlorine per million parts of water were used during June, July and half of August, and 1.5 parts were used for the rest of August and the first half or September. When 2.0 parts of chlorine were used the outbreak abruptly ceased. This chart shows in a graphic manner the large number of typhoid cases for the five years preceding the use of hypochlorite and also the epidemic of typhoid fever during the latter half of 1910. The

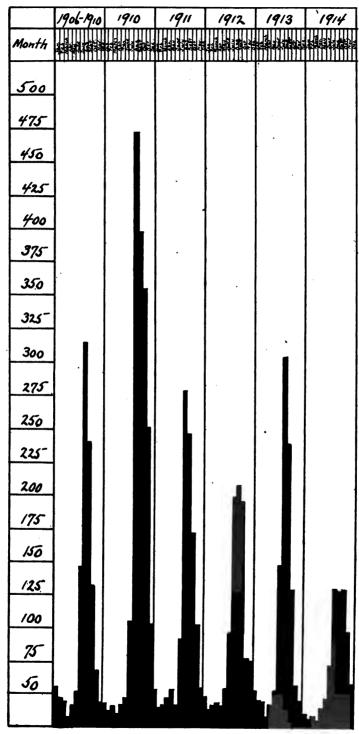


CHART No. 2—Typhoid cases by months.

tendency towards a gradual reduction of typhoid fever, beginning with 1911, is also indicated, but the chart is somewhat marred by the increased number of typhoid fever cases during the summer months of 1913.

Chart No. 3 shows the total yearly number of deaths from typhoid fever since 1890, and the columns from 1890 to 1910 are usually in marked contrast to the hypochlorite years, from 1911 to 1914, inclusive. There is an occasional column in the pre-hypochlorite years which is as low or lower than some of the columns indicating the years in which hypochlorite was used. The majority of the columns, however, show a much larger number of deaths from typhoid fever in the years previous to the years of hypochlorite than in those years in which calcium hypochlorite has been used for disinfecting the city drinking water. This fact becomes even more striking when we consider that the population has increased since 1890 from 435,290 to 579,593 persons.

Chart No. 4 shows the death rate from typhoid fever per 100,000 inhabitants since 1890 and is, of course, the most correct method of estimating the prevalence of the disease in the community, since we have no way of being sure that all of the typhoid fever cases are reported. These typhoid death rates are quite variable for the various years preceding 1911, but most of these rates are much higher for the pre-hypochlorite years than for the hypochlorite years of 1911 to 1914, inclusive. This chart certainly shows that a marked improvement has been made upon the typhoid fever death rate during these latter years and the relation between the use of the proper amount of hypochlorite and the drop in the number of cases and deaths of this disease shows that the disinfection of the drinking water has had much to do with the reduction of the number of typhoid cases and deaths.

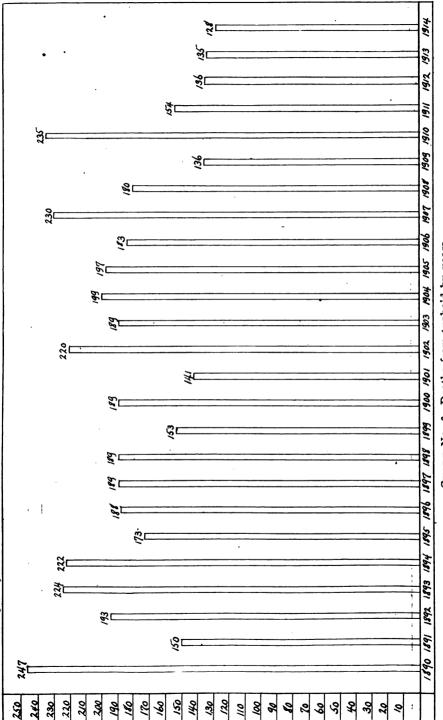


CHART No. 3—Deaths from typhoid by years.

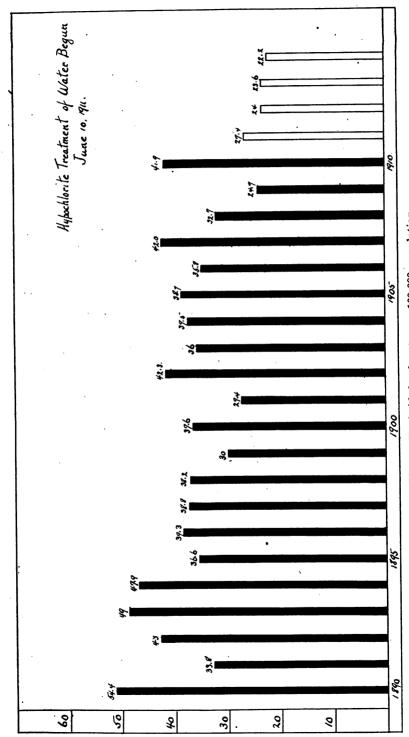


CHART No. 4-Typhoid death rate per 100,000 population.

# EXAMINATION OF WELLS, SPRINGS, TABLE WATERS AND OTHER MISCELLANEOUS SPECIMENS.

During the year we have made 183 examinations of specimens of water from the wells, springs, table waters, filters, special tap waters, swimming pools and other miscellaneous specimens. These have been reported to the Assistant Commissioner of Health, and, whenever possible, the appropriate remedies have been adopted.

### BACTERIOLOGICAL EXAMINATION OF MILK.

During the past year we made 16,180 bacteriological examinations of milk, these examinations usually consisting in the bacterial enumeration of the organisms present per cubic centi-This is nearly double the number of examinations made during 1913, when 8,916 specimens were examined. Of these 6.481 were collected at the various railroad stations, 1,182 from wagons, 1,035 from shops, 634 from lunchrooms, 638 from specimens obtained at the plant before pasteurization, 643 from specimens obtained at the plant after pasteurization, 980 original package samples of pasteurized milk collected from the wagons on the street, 121 examinations of specimens obtained during the annual milk-shippers' contest and 4,475 specimens of a miscellaneous nature, such as examination of milk from individual cows, examination of pasteurized milk at different stages of pasteurization, examination of milk for typhoid and paratyphoid bacilli, examination of milk for the colon bacillus as a means for determining the time of contamination, examination of milk for the cause of disagreeable odors or tastes, milk from Sydenham Hospital, and milk from which no counts were obtained owing to contamination or other causes.

TABLE No. 5-Comparison by Months of the Milk Collected from

		J	an.	F	eb.	M	ſar.	A	pril.		May.
Bacterial, Count.	Rating Figure.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
Under 10,000 10,000- 50,000 50,000-100,000 100,000-250,000 250,000-500,000 500,000-1,000,000 Over 1,000,000	90	36 107 67 70 33 35 38	9,630 5,025 3,500 660 350	173 85 69	15,570 6,375 3,450 640 240	317 141 130		160 83 153	14,400 6,225 7,650 2,500 660	63 42 74	5,670 3,150 3,700 1,320 540
Total		386	22,765	458	32,575	910	60,645	775	34,235	501	15,380
Bacterial index			59.0		71.1		66.6		44.2		30.7

Stations During 1914 (Bacterial Index Computed by Levy Method).

J	une.	J	uly.	A	Aug.	s	Sept.	(	Oct.	1	Nov.	. 1	Dec.
No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	·Product.	No. of Examinations.	Product.
8 32 37 80 95 66 310	800 2,880 2,775 4,000 1,900 660	2 13 15 24 27 26 158	200 1,170 1,125 1,200 540 260	2 14 7 8 15 10 63	200 1,260 525 400 300 100	10 19 24 42 33 39 107	1,000 1,710 1,800 2,100 660 390 0	53 51	3,825 4,700	62 225 136 79 73 29 94	20,250	73 276 165 67 85 46	12,375 3,350 1,700
628	13,015	265	4,495	119	2,785	274	<b>7,66</b> 0	678	17,375	698	4 <b>2,</b> 350	<i>7</i> 89	50,025
	20.9		17.0		23.4		27.9		25.7		60.7		63.4

The above table (No. 5) shows the comparison by months of the milk collected from the railroad stations during 1914. This comparison is expressed by means of the Levy bacterial index, which is described in the report of the Commission for National Milk Standards in Public Health Report No. 78, issued by the United States Public Health Service. This system shows the number of specimens during the various months which were between the limits of the various bacterial counts stated in the table. The bacterial index for each month is also stated and it can be seen that this is higher as a rule in the cooler months and lower for the summer months. A high index expresses a better quality of milk, since this index is produced by low bacterial counts.

TABLE No. 6—Comparison by Months of the Milk Collected from

		Ja	an.	F	eb.	M	Iar.	Aj	pril.	N	ſay.
Bacterial Count.	Rating Figure.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
Under 10,000 10,000- 50,000 50,000-100,000 100,000-250,000 250,000-500,000 500,000-1,000,000 Over 1,000,000	100 90 75 50 20 10	0 5 5 9 11 9 27	0 450 375 450 220 90	6 8	0 540 600 850 380 90	17 23 42 33	2,100 660	5 4 10	100 450 300 500 420 240	1 3 0 5 12 6 53	100 270 0 250 240 60
Total	-	66	1,585	71	2,460	212	8,410	162	2,010	80	920
Bacterial index			24.0		, 34.6		39.7		12.4		11.5

Wagons During 1914 (Bacterial Index Computed by Levy Method).

J	une.	Ju	ıly.	A	ug.	s	ept.	С	ct.	N	ov.	ľ	Dec.
No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
0 2 0 6 7 6 31	0 180 0 300 140 60	0 0 0 2 0 5	0 0 0 40 0	0 2 1 0 0 1 16	0 180 75 0 0	1 2 2 5 5 9 43	100 180 150 250 100 90	0 4 8 20 22 11 93	0 360 600 1,000 440 110	5 16 12 38 19 12 36	500 1,440 900 1,900 380 120	9 22 20 35 28 8 27	900 1,980 1,500 1,750 560 80
52	680	7	40	20	265	67	870	158	2,510	138	4,240	149	6,770
	13.1		5.7		13.3		13.0		15.9		30.7		45.4

The above table (No. 6) shows a comparison by months of the market milk collected from wagons during 1914. When this table is compared to Table No. 5 a deterioration in the milk after leaving the station can be noted, since the bacterial index is lower for the various months in Table No. 6 than it is for the corresponding months in Table No. 5, which shows the milk obtained at the stations at an earlier period of its route from the farmer to the consumer.

TABLE No. 7—Comparison by Months of the Milk Collected from

		Ja	ın.	Fe	b.	M	ar.	Aı	oril.	N	fay.
BACTERIAL, COUNT.	Rating Figure.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations,	Product.
Under 10,000 10,000- 50,000 50,000-100,000 250,000-500,000 500,000-1,000,000	100 90 75 50 20 10	1 2 4 4 10	0 90 150 200 80 100	28 33 27 16	100 1,530 2,100 1,650 540 160	10 15 11 8	2,200 720 750 750 220 80	1 4 11 16 15	200 90 300 550 320 150	0 5 5 11	0 0 375 250 220 110
Over 1,000,000  Total		34 55	620	170		83	4,720	135	1,610	122	955
Bacterial index.			11.3		35.8		56.9		8.8		7.8

Shops During 1914 (Bacterial Index Computed by Levy Method).

J	une.	J	uly.	A	ug.	S	ept.	c	Oct.	, N	lov.	I	Dec.
No. of Examinations.	Product.	No. of Examinations,	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
0 3 0 3 7 4 82	0 270 0 150 140 40	0 0 0 2 2 0 27	0 0 100 40 0	2 0 3 4 3 4 32	200 0 225 200 60 40	2 1 2 1 4 5 57	200 90 150 50 80 50	2 0 2 3 10 10	200 0 150 150 200 100	0 6 4 4 5 5 6	0 540 300 200 100 50	38 8 6 5 2	300 720 600 300 100 20
99	600	31	140	48	725	72	620	94	800	30	1,190	47	2,040
	6.1		4-5		15.1		8.6		8.5		39.7		43.4

The above table (No. 7) shows the comparison by months of the milk collected from the shops during 1914, and as a rule there is a slightly increased deterioration in the character of the milk as compared with that obtained from the wagons. Some of the months, however, show a slightly higher figure for the shops than for the wagons, and there is no other material difference between the character of these two classes of milk.

TABLE No. 8—Comparison by Months of the Milk Collected from

•		J	an,	F	eb.	M	lar.	A	pril.	M	ſay.
Bacterial, Count.	Rating. Figure.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
Under 10,000 10,000- 50,000 50,000-100,000 100,000-250,000 250,000-500,000 500,000-1,000,000 Over 1,000,000	100 90 75 50 20 10	0 0 1 1 0 8	0 0 50 20 0	14 15	0 1,260 1,125 1,000 300 60	16 27	1,530 1,200 1,350 540 170	9 8 12 10	600 600	1 4 3 9 3 2 21	100 360 225 450 60 20
Total		10	70	95	3,745	188	6,290	123	2,860	43	1,215
Bacterial index			7.0		39.4		33-4		23.3		28.2

Lunchrooms During 1914 (Bacterial Index Computed by Levy Method).

J	une.	Ju	ıly.	A	ug.	Se	ept.	0	ct.	N	ov.	1	Dec.
No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Produst.
0 0 0 1 1 2 31	0 0 50 20 20	0 1 0 1 0 3	100 0 75 0 20 0	0 2 2 2 6 3 33	0 180 150 100 120 30 0	0 1 0 4 0 6 37	0 90 0 200 0 60	0 I I 5 2	0 0 75 50 100 20	sar du:	nples	unch: exan Nove	nined mber
35	90	6	195	48	580	48	350	38	245				
	2.6	] 	32.5	}	12.1		7.3		6.4			•	

The above table (No. 8) shows quite variable results for the milk obtained from the lunchrooms. In some months the bacterial index is very low, showing decidedly poor milk, and in other months it is higher, approaching in its quality the character of the milk obtained from the wagons during similar months.

When one compares these four tables it is seen that the milk as it arrives at the railroad station is of a better quality, containing smaller numbers of bacteria than that obtained either from the wagons or from the shops, dairies and lunchrooms. The milk upon the wagons is usually of a better character than that obtained from the shops and lunchrooms, but there are some exceptions to this condition, as the results are somewhat variable.

Table No. 9—Contest of Shippers, October 27 to November 13, Inclusive.

Bacterial Count.	Rating Figure.	No. of Exami- nations.	Product.
Under 10,000	100	72	7,200
10,000-50,000		29	2,610
50,000-100,000		7	525
100,000-250,000	50	7 8	400
250,000-500,000	20	2	40
500,000-1,000,000	10	2	20
Over 1,000,000	·o	I	•
Total		121	10,795
Bacterial index			89.2

The above table (No. 9) shows the character of the milk obtained during the milk contest held by the Maryland State Dairymen's Association from October 27 to November 13, inclusive. This table, with its very high bacterial index, indicating milk of a low bacterial count, shows that much purer milk can be obtained when sufficient care is taken in its handling. The large number of specimens under 500,000 bacteria per cubic centimeter shows that if the farmer will exert sufficient care this result can be obtained under ordinary conditions.

TABLE No. 10-Yearly Rating of Various Classes of Milk.

		Sta	itions.	Wa	gons.	Sh	iops.		unch- ooms.
BACTERIAL COUNT.	Rating Figure.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.	No. of Examinations.	Product.
Under 10,000	100, 90, 75, 50, 20, 10, 0	1,452 853	63,965 44,500 15,160 5,290	84 83 187 179	6,225 9,350 3,580	45 68 91	4,050 5,100 4,550 2,100 900	47 46 77 69 43	4,230
Total		6,481	303,295	1,182	31,765	1,035	20,100	634	15,640
Bacterial index			46.8		26.9		19.4		24.7

The above table (No. 10) shows the Levy bacterial index for the entire year for the milk obtained from stations, wagons, shops and lunchrooms. The yearly bacterial index shows a deterioration in the character of the milk obtained from the wagons and shops as compared to the station milk, and although the index of the lunchroom milk is slightly higher than that of the shop milk, yet it is slightly lower than that of the milk obtained from the wagons.

Table No. 11—Comparison of Average Yearly Bacterial Counts of 1914 with Former Years, also Showing the Levy Bacterial Index.

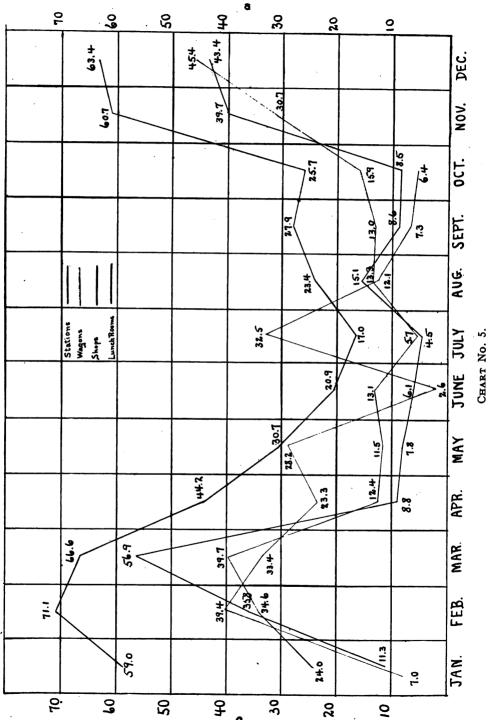
	1911.	1912	•	1913.		1914	·•
Class.	Average Bacterial Count.	Average Bacterial Count.	Bacterial Index.	Average Bacterial Count.	Bacterial Index.	Average Bacterial Count.	Bacterial Index.
Stations Wagons Shops Lunchrooms	2,444,012 3,947,892	2,557,500 7,713,500 6,963,200	24.0 8.7 13.1	1,070,100 3,385,100 7,780,800 5,932,600	50.9 21.7 13.5 13.7	1,872,547 4,407,047 6,143,821 7,390,648	46.8 26.9 19.4 24.7

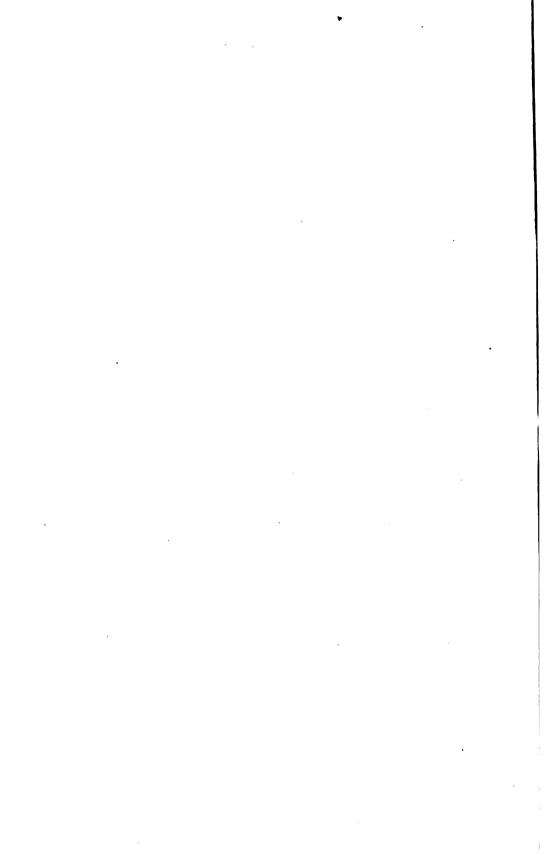
Table No. 11 shows a comparison between the yearly average and bacterial index of milk obtained from the stations, wagons, shops and lunchrooms since 1913 and between some of these other sources since 1911. The general tendency is towards an improvement in the character of the milk year by year. This fact is shown by the higher bacterial index for each consecutive year. The stations for 1914 show an exception to this general tendency, but this may be due to the much larger number of milk samples examined and the difference is slight. This table also shows the deterioration in the quality of the milk as it progresses from the stations through the wagons to the shops and lunchrooms.

The above table (No. 12) shows a comparison between the various samples of milk obtained from pasteurizing plants or from samples as dispensed to consumers, as explained in the report of the Commission on Milk Standards, published in Public Health Report No. 78 of the United States Public Health Service. The ratings for comparison between milk samples from different sources are called the bacterial content and are obtained by extracting the square root of the count divided by 100. The Levy average is the average of the square roots obtained from all of the counts from a given dairy, as above described, and the equivalent bacterial count is the reverse of the above obtained by squaring the Levy average and multiplying by 100.

The figures in this table present a fair method of comparing the milk of the different dairies and also of comparing the pasteurized milk at the dairies with that finally dispensed to customers. The raw milk received at each dairy can also be compared with that received at the other dairies and the raw milk at each dairy can also be compared to the milk at this same dairy after it has been pasteurized.

An examination of this table will show that the raw milk as received at the various dairies shows a marked difference in the equivalent bacterial count, some showing much higher counts than others. The table also shows that the pasteurized product at the dairy varies greatly in its bacterial count as obtained from the various dairies, and that there are also wide differences in the bacterial count of the final package as dispensed to the customer. A comparison of the equivalent bacterial count of the pasteurized milk at the plants with the pasteurized milk dispensed to customers shows that in some instances there is practically no bacterial increase between the time that the milk is pasteurized and the time that it is obtained by the inspectors from the bottles in the wagons on the street. In other cases there is a moderate increase in the bacterial count between the pasteurizing plants and the wagon samples,





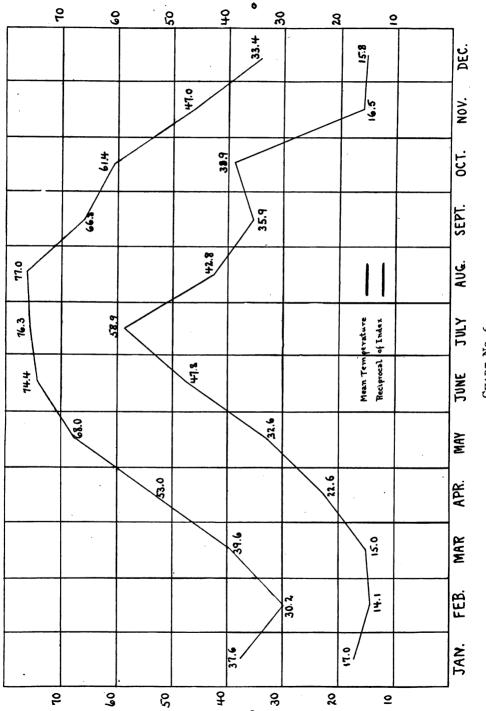
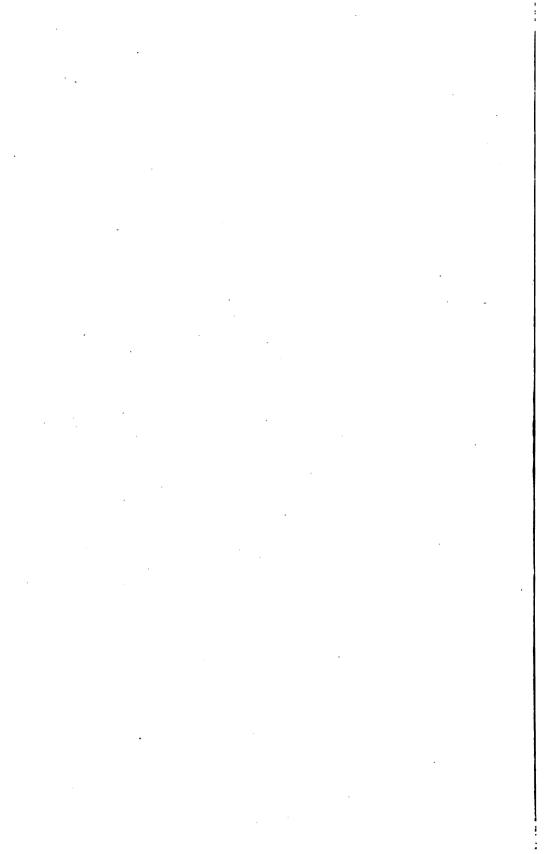


CHART No. 6.



and in a number of instances there is a decided increase in the bacterial count between the time that it is pasteurized at the plant and the time that it is dispensed to the customers. Dairy No. 31 is a special milk which is not pasteurized.

The above chart (No. 5) shows the bacterial index for the various months of the year from station, wagon, lunchroom and shop milk. The red line for the station milk shows the highest curve, with the exception of one month, and this would be expected, since the higher the index the lower the bacterial count. There is quite a contrast between the milk produced in the winter months and that produced during the warmer months of the year. The milk from the wagons shows a lower index than that obtained from the stations, but the milk obtained from the shops and lunchrooms shows some curious variations. At times they nearly approach the bacterial index of station milk and exceed that of the wagon milk, but during other months they both drop below the station and wagon milk. This method of comparing the bacterial index by means of curves shows in a striking way the difference between the bacterial count in the winter and summer months and also the contrast between the milk samples obtained from the various sources mentioned in the chart.

The above chart (No. 6) expresses by means of curves the relation between the reciprocal of the bacterial index of the station milk and the mean monthly temperature. One thousand times the reciprocal of the bacterial index was used to make the curves convergent instead of divergent and this shows a general correspondence between the average monthly temperature and the height of the bacterial count as indicated by the Levy system of rating.

Table No. 13—Showing by Months the Results of Examinations of Milk from Railroad Stations by the Slack Method.

,	tions tl	ber of Shownan I, cocytes	ving ,000,00	More O	tion:	ber of s Show han 1, cocyte	wing ] ,000,00	Less   o	inations by
Months,	Streptococci Under 1,000,000 per c. c.	Percentage Streptococci Under 1,000,000 per c. c.	Streptococci Above I,000,000 per c. c.	Percentage Streptococci Above 1,000,000 per c. c.	Streptococci Under 1,000,000 per c. c.	Percentage Streptococci Under 1,000,000 per c. c.	Streptococci Above I,000,000 per c. c.	Percentage Streptococci Above 1,000,000 per c. c.	Total Number of Examinations Months
January	26	6.6	0	o	361	92.1	5	1.2	39
February	19	4.1	o	0	436	93.8	10	2.1	46
March	142	15.5	18	1.9	730	79.6		2.9	91; 78
April	202	15.5 25.8 6.1 6.5	9 3 3 0	0.6	548 466	70.0	24 7	3.I I.4	70, 50,
June	31 42	6.1	3	0.4	576	92.0 89.2	24	3 8	64
July	4	1.5	ŏ	0.4	242	01.7	18	3.8 6.8	26.
August	14	11.2	0	0	104	91.7 83.2	7	5.6 2.1	12
September	39	13.4	4 8	1.4	241	83.I	6	2.1	29
October	70	10.2	8	1.2	571	83.6 77.8	34	5.0 2.2	29 68 69
November	134	19.3	5	0.7	541 565	77.8	15	2.2	69
December	196	24.2	14	1.7	565	69.8	34	4.2	80
Total	919	14.0	64	1.0	5,381	81.9	211	3.1	6,57

### Examinations for Leucocytes and Streptococci in Milk.

During the year we made 6,575 examinations by the Slack method for the detection of excessive numbers of leucocytes and streptococci in milk collected at the railroad stations, and the above table (No. 13) shows the result of this work. As seen from the table, 14 per cent. of the specimens showed leucocytes over 1,000,000 per cubic centimenter, but only 1 per cent. of the specimens examined contained streptococci

above this number. When the leucocytes and streptococci are both over 1,000,000 per cubic centimeter the result is reported to the Chief of the Bureau of Food and Dairy Inspection, who has the herd inspected for garget and other inflammatory conditions of the udder. The results of the sanitary inspection of the herds following these reports are given in the report of the Chief of this Bureau, to which the reader is referred for further information.

## Examination of Milk Sediments for Tubercle Bacillus.

During the past year we have examined 118 milk sediments, representing milk from 58 farms, for the presence of the tubercle bacillus, or pyogenic bacteria. These specimens were obtained from the railroad stations and the examinations were made by the following technique proposed by Kinyoun:

Fifteen cubic centimeters of milk are centrifugalized for one hour, the fluid portion is poured off and cream and sediment thoroughly mixed. Normal salt solution is added to 15 cubic centimeters, and the mixture is well shaken. It is then divided into two parts of 7½ cubic centimeters each. One part is injected untreated subcutaneously; to the other part 0.2 cubic centimeter of antiformin are added and this is brought up to 15 cubic centimeters. This is thoroughly shaken and allowed to stand several minutes, when it is centrifugalized for ten minutes. The fluid portion is poured off and the cream and sediment are mixed with two cubic centimeters of salt solution and injected intraperitoneally.

The work of the past year in the examination of market and pasteurized milk for the presence of the tubercle bacillus or other infectious organisms has brought the number of investigations to 500 tests, either upon the milk from dairy farms or from pasteurized milk. The work as completed shows the following results:

Three hundred and forty-eight pigs were inoculated from 174 specimens of milk, which were obtained from 150 dairy

farms. In 254 of these specimens we were unable to detect any infectious organisms, but the staphylococcus aureus was detected in 35 cases, the tubercle bacillus in 8 cases, the pneumococcus in 3 cases, the colon bacillus in 1 case, the streptococcus pyogenes in 1 case and the paratyphoid bacillus in 2 cases. Three of the animals died from shock and the record of 42 of these pigs was not obtained.

One hundred and forty-six examinations were made of pasteurized milk and 112 were negative, while 18 contained the staphylococcus aureus, 14 the colon bacillus and 1 the streptococcus pyogenes.

During the entire period referred to above we have examined milk sediments from 175 dairy farms and the tubercle bacillus was detected in specimens from 7 different farms, making a percentage of 4. The staphylococcus aureus was obtained from 23 dairy farms, or 13.1 per cent.; the streptococcus pyogenes was obtained from 1 farm, a percentage of .5 of 1 per cent.; the paratyphoid bacillus from 2 farms, or 1.1 per cent., and the colon bacillus from 1 farm. These results were all reported to the Bureau of Food and Dairy Inspection and proper measures were taken in regard to these findings.

The result of this investigation shows that in a fair number of instances infectious organisms of various kinds are detected in market milk and also demonstrates that at times pathogenic organisms escape the process of pasteurization and are found in the pasteurized product. Such organisms which are pathogenic for guinea pigs cannot always be considered as capable of producing diseases in human beings, but many of them are probably able to do so, and there is no data at present which enables us to differentiate the organisms solely pathogenic for guinea pigs from those pathogenic for human beings. In the case of the tubercle bacillus, however, this doubt does not exist, as those pathogenic for guinea pigs can be assumed as also pathogenic for human beings.

Examination of Pasteurized and Market Milk for the Presence of the Streptococcus or Pneumococcus.

We examined 31 additional specimens of market milk for the presence of a virulent streptococcus or pneumococcus by inoculation of mice, but failed to find either organism in any instance. The following virulent organisms, however, were isolated, namely: the staphylococcus aureus, the bacillus pyogenes and the bacillus proteus in one instance and the bacillus coli in two cases.

### Examination of Oysters and Clams.

During the past year we have examined 90 samples of shell stock oysters, 15 samples of shucked oysters and 65 samples of shell stock clams. The scoring of the shell stock oysters and clams has been expressed according to the method of the Committee on the Bacterial Examination of Oysters of the American Public Health Association, but the results from the shucked stock have simply been expressed in a table, since multiple samples were not collected. The tables which follow show quite low scores for both the shell stock ovsters and clams, with a few exceptions. The highest score allowable for oysters to pass the condemnation of the Bureau of Chemistry of the United States Department of Agriculture is 23, and it can be seen that several of the final scores from the shell stock oysters have exceeded this figure. The clams all show very low scores, but both oysters and clams often show high bacterial counts. There is also quite a contrast between the shell stock and the shucked stock, since the bacterial counts in the shucked stock are much higher and the colon bacillus is present in much smaller quantities of the oyster liquor. These results simply confirm those of previous years, since in the report of 1913 it is shown that there is a very great difference between the shucked stock and the shell stock, the

former showing much higher bacterial counts and much higher numbers of colon bacilli present, as indicated by the higher scores.

TABLE No. 14—Oysters (Shell Stock).\*

Source,	Date	Average Bac- terial Count.	Score.	Presumptive Test Score.
Rock Bar, Magothy River	Oct. 14	7,400	5	13
West River	Oct. 14	8,400	320	320
Chester River	Oct. 14	10,800	23	140
Chester River	Oct. 26	1,000	14	23
Herring Bay	Oct. 26	1,600	41	50
West River	Oct. 26	1,000	32	41
Rappahannock River	Nov. 7	10,800	140	500
West River (off Bay Shore)	Nov. 7	37,000	2	23
White Hall	Nov. 7	37,600	5	32
Fishing Creek	Nov. 14	16,400	14	50
Herring Bay	Nov. 14	27,800	31	32
West River	Nov. 14	34,200	3	50
Eastern Bay	Nov. 27	6,940	I	I
Holland Point	Nov. 27		. 0	0
West River	Nov. 27		5	14
Herring Bay	Dec. 19	11,820	2	3
Patuxent River	Dec. 19	3,900	I	3
West River	Dec. 19	4,440	I	4
			1	١ .

<sup>\*</sup>Specimens obtained from oyster boats at Baltimore wharves.

TABLE No. 15-Oysters (Shucked):

Source.	Date.	Bacterial Count.	Colon Bacillus per c. c.
Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house. Wholesale house.	Apr. 25	500,000 800,000 1,000,000 950,000 160,000 160,000 110,000 80,000 110,000 120,000 7,000,000 240,000	10 10 10 10 10 1,000 10 100 100 100 1000 10,000

## TABLE No. 16—Clams (Shell Stock).

Source.	Date.	Average Bacterial Count.	Score.	Presumptive Test Score.
Seaside Clams	May 16	4,360	. 4	4
Mobjack Bay	May 16	17,050	ī	ī
Pocomoke Sound	May 16	14,600	I	23
Seaside Clams	May 23	1,460	I	I
Hampton Bar	May 23	6,280	3	4
Mobjack Bay	May 23	2,880	0	0
Severn River	June 6	9,162	0	0
Hampton Bar	June 6	13,750	3	3
Seaside Clams	June 13	5,400	0	0
Pocomoke Sound	June 13	4,580	I	3
Mobjack Bay	June 13	8,500	0	I
Hampton Bar	Sept. 5	3,040	0	0
York River	Sept. 5	2,152	0	0
	l			1

#### Examination of Other Foods.

The number of examinations of the various other foods such as ice, ice cream, vegetables and other miscellaneous foods is expressed in Table No. 17 and the results of these examinations have been reported to the Chief of the Bureau of Food and Dairy Inspection.

Examination of Rats for the Presence of the Bacillus of Bubonic Plague.

During the year 12 rats were trapped along the water-front by Inspector Kelly and were examined by Dr. F. W. Hachtel for the presence of infection by the bacillus of bubonic plague. This examination consisted in a careful dissection of each rat, but no suspicious signs of plague infection were discovered in any case. The number of rats that were caught has been so few that the work is of practically no value, and in order to carry on this work properly several rat catchers should be employed for this purpose and at least one laboratory man should give his entire time to the dissection and examination of these rats.

#### CLERICAL SUB-DIVISION.

Table No. 17, which follows, gives the report of the Clerical Sub-Division, which is under the charge of Mr. Harry L. Carman. This table shows that we made 45,247 laboratory examinations during the year, as compared to 37,931 for the previous year. The laboratory has also given out 8,654,000 units of diphtheria antitoxin for indigent cases, 46,050 tubes of anti-smallpox vaccine to health wardens or public institutions and 1,542 complete doses of anti-typhoid vaccine to physicians. The diphtheria antitoxin and the anti-smallpox vaccine are purchased in the trade, but the anti-typhoid vaccine is manufactured in the laboratory. The work in detail follows in the table.

# TABLE No. 17—Examinations of Specimens to Determine the Presence of Disease from January 1, 1914, to December 31, 1914.

Diphtheria—	•
Positive cultures	<b>8</b> 78
Negative cultures	2,607
Suspicious cultures	5
Unsatisfactory cultures	89
Total cultures	3,579
Positive cultures of school children's throats	127
Negative cultures of school children's throats	993
Suspicious cultures of school children's throats	19
Unsatisfactory cultures of school children's throats	55
-	
Total cultures	1,194
<u> </u>	
Positive cultures from throat examined by throat inspector	281
Positive cultures from nose examined by throat inspector	81
Negative cultures from throat examined by throat inspector	3,733
Negative cultures from nose examined by throat inspector	1,112
Contaminated cultures from throat examined by throat inspector	64
Contaminated cultures from nose examined by throat inspector	0
Total cultures	5,271
Tuberculosis—	
Positive results	479
Negative results	1,536
Suspicious results	11
Unsatisfactory results	2
Total specimens	2,028
. =	===
Typhoid Fever—	
Positive reactions	413
Negative reactions	1,229
Suspicious reactions	217
Unsatisfactory reactions	9
-	
Total reactions	1,868

TABLE No. 17 (Continued)—Examinations of Specimens to Determine the Presence of Disease from January 1, 1914, to December 31, 1914.

Blood Examined for Paratyphoid-	
Positive	· 70
Negative	932
Suspicious	66
Total reactions	1,068
Typhoid Bacillus from Blood Cultures—	
Positive results	31
Negative results	149
Unsatisfactory results	I
Total results	161
Paratyphoid Bacillus for Blood Cultures—	
Positive results	5
Negative results	149
Unsatisfactory results	1
Total results	155
Malaria	
Positive results	. 4
Negative results	338
Unsatisfactory results	95
Total results	437
Institutions and Hospitals Examined for Diphtheria—	•
Positive results	33
Negative results	419
Suspicious results	6
Unsatisfactory results	6
Total results	464
Cultures Examined for Meningococcus—	
Positive	О
Negative	11
Total results	11

Table No. 17 (Continued)—Examinations of Specimens to Determine the Presence of Disease from January 1, 1914, to December 31, 1914.

Antitoxin units supplied to indigent cases	8654,000
Tubes of vaccine used during the year	46,050
Complete doses of anti-typhoid vaccine furnished	1,542
Miscellaneous examinations	100
Water examinations	1,017
Milk examinations	16,189
Oyster examinations	113
·Ice cream examinations	24
Ice examinations	19
Rat examinations for bubonic plague	12
Clam examinations	55
Vegetable examinations	8
Syrup examinations	· 1
Butter examinations	1
Meat examinations	1
Condensed milk examinations	1
Milk sediment inoculated into animals for streptococci and	
pneumococci	. 31
Examinations of milk sediment for tuberculosis	118
Fowl examinations	I
Examination of milk for leucocytes and streptoccocci	6,575
Examination of control cultures for disinfection	4,755
·	
Total number of examinations	45,257

Table No. 18, which follows, gives the results of the treatment of patients with diphtheria and the immunization of persons exposed to this disease in infected houses. During the year we furnished antitoxin to 755 cases, amongst which there were 53 deaths, giving a fatality of 7 per cent. In 419 of these cases the diagnosis was verified by the bacteriological examination and of these cases only 22 died, giving a percentage of fatality of 5. The fatality from nasal diphtheria was 9.6 per cent. and from laryngeal diphtheria 12.5 per cent.

We also furnished immunizing doses for 650 persons, and of these only four later developed diphtheria. The other portion of the table shows the progressive increase in the fatality from diphtheria according to the day of the disease on which the antitoxin is administered, and the results would indicate that if antitoxin is administered promptly within the first twenty-four hours of the disease the fatality can be reduced from about 50 per cent. to less than 5 per cent. From 1898 to 1014, inclusive, we have given out immunizing doses of antitoxin to 4.755 contacts exposed to diphtheria in the various infected houses and only 24 of these persons subsequently developed diphtheria. This is an attack rate of 0.4 of 1 per cent. and compares most favorably to an attack rate that may have been expected if antitoxin had not been used for the prevention of the further spread of diphtheria. I have not been able to find any actual figures which show the percentage of second or third cases of diphtheria developing in a household. The experience of others, however, before the days of antitoxin showed that frequently a second case would develop in a household following the presence of one case of diphtheria in the house. Young,\* in citing figures from the weekly bulletin of April 11, 1914, of the New York Department of Health, gives 13 per cent. of secondary cases occurring in patients in New York. Only those cases were considered secondary which developed after the expiration of the incubation period of the disease, but even with these figures it can be seen that this large percentage compares very favorably with the 0.4 of I per cent, of secondary cases following the use of an immunizing dose of diphtheria antitoxin.

<sup>\*</sup>Journal of American Medical Association, Volume LXIV, No. 6, February 6, 1915, page 487.

Table No. 18—Cases of Diphtheria Treated With Antitoxin Furnished by the Health Department from January 1. 1012. To December 31, 1014.

20				Exte	int of	Extent of Membrane.	ıbrane.		ပိ	Complications.	tions.		Z Z	Cases Immunized.	nized.
	Cases.	Deaths.	Fatality.	.slisno'T	Pharynx.		Larynx.	Broncho- Pneumonia.	Mephritis.	Sepsis.	Paralysis.	Cardiac Paralysis.	Total.	Successful.	Diphtheria Developed.
	755	23	7.0	409	242	22	161	 ν		н	8	ιΩ	650	949	
	Cases in Deaths Percent Deaths	Cases in which diphthe Deaths resulting Percentage of fatality. Deaths from nasal dip	Cases in which diphtheria bacilli were found. Deaths resulting Percentage of fatality  Deaths from nasal diphtheria out of 52 cases	were of 5	e found	::::	419 5.0 5	Percentage Cases of la Deaths rest	Percentage of fatality Cases of laryngeal diphtheria Deaths resulting Percentage	f fatal yngeal ting	diphth	eria	- : : : : :		9.6
	Fatality Accor ease	After Ugiding to Due e at Time	Fatality After Use of Antitoxin According to Duration of Disease at Time of Injection.		ıst Day.	sq Day.	3d Day.	.4th Day.	Sth Day.	oth Day.	7th Day.	Sth Day.	10th Day.	s Weeks.	Опкпомп.
	Cases Deaths Percentage	age	Cases	<u> </u>	191 9	13 13 5.8	147	58 3 5.1	8,08	16 183.5	34	5 1 20.0	2 I 50.0	8 I 12.5	24 I 4. I
	Fatality Average	Fatality in cases 1 Average fatality i	Fatality in cases not treated with antitoxin (Welch)	h anti	itoxin Ir yea	(We	lch)	95, 1896	( 1897)	prior	to the	use of	antitox	in:	2.1 %

# REDUCTION IN DIPHTHERIA BY THE USE OF DIPHTHERIA ANTITOXIN.

In Chart No. 7, which follows, it can be seen that the number of cases of diphtheria per 100,000 population has perceptibly diminished since the introduction of the free distribution of antitoxin, which was begun in 1898. However, from the years 1911 until 1914, inclusive, the number of reported cases shows a moderate increase.

It is difficult to analyze the various causes which have brought about this result, but the matter should at least be considered in order to again reduce the number of cases if possible. Amongst those measures which might be adopted in order to bring about a reduction in the cases of diphtheria a careful investigation of the schools is the first point to be considered. A close relationship between the opening of the schools and an increase in the number of diphtheria cases has been noted in the report for 1911, as indicated by Chart No. 3, opposite page 205. A great many of the positive cultures of the schools will be found to be non-virulent, but if measures could be adopted to weed out those children showing virulent cultures of the diphtheria bacillus enough of such cases might be found to warrant them being placed in special schoolrooms in case it was not deemed expedient to deprive them of their school work.

Another method of decreasing the prevalence of diphtheria might be found in compelling physicians to take cultures from the noses as well as the throats of all convalescents, as a certain number of positive cultures is found in nose cultures where the throats are negative. Our present force of throat inspectors would not warrant the taking of a nose culture from every contact, but this force should be increased so that this can be done. The determination of the virulence of organisms, which are morphologically identical with the diphtheria bacillus, should also be carried out and special measures should be taken in preventing these cases from mixing with the public.

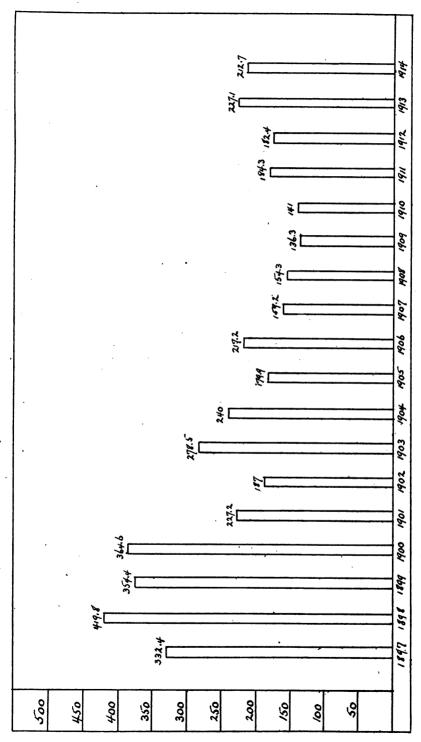


CHART No. 7-Reported cases of diphtheria per 100,000 population.

An examination of Chart No. 8, which follows; will show the deaths per 100,000 population from diphtheria in the pre-antitoxin period, from 1875 to 1897, inclusive, as compared to the deaths per 100,000 population since the free distribution of antitoxin, which was begun in 1808. This action also encouraged the use of antitoxin by the physicians for the general population who were able to pay for this remedy. and the effect in the reduction of the number of deaths from diphtheria can be easily noted on examining the chart. maximum of 264.1 deaths per 100,000 population in 1882 before the use of antitoxin-contrasts markedly with a maximum of 83.2 in the first year that antitoxin was used, and a minimum of 45.9 deaths in the pre-antitoxin year of 1893 compares most favorably with a minimum of 11.8 in the antitoxin period during the year of 1908. The effect of antitoxin in preventing deaths from diphtheria is also seen by comparing the average number of deaths per 100,000 population from 1875 to 1897, inclusive, to a similar average from 1898 to 1014, inclusive. During the earlier period, in which no antitoxin was used, the average number of deaths per 100,000 population was 113.2; while this average number during the latter period, when antitoxin was used, fell to 27.0. lives have thus been saved by the use of this curative and preventive remedy, and although disinfection and early bacteriological diagnosis have probably had some part in reducing the number of cases, yet the use of antitoxin in the treatment and prevention of diphtheria has played the most important part in this saving of human life.

#### REPORT OF THROAT INSPECTORS.

The report of the throat inspectors shows that 5,271 cultures were taken from contacts or convalescents in houses quarantined on account of diphtheria by the throat inspectors, Dr. B. P. Herzog and Dr. G. H. Woltereck. Of these, 362 were positive for diphtheria, and such individuals if allowed to mix

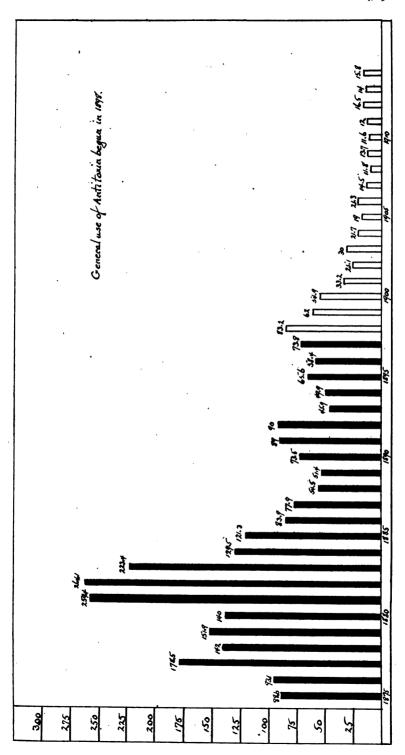


CHART No. 8—Deaths from diphtheria per 100,000 population.

with the public would doubtless have caused a large number of cases of diphtheria to develop. We also examined 3,579 cultures taken by attending physicians from contacts and convalescents, and of these 878 were positive for diphtheria. These individuals were also kept from mixing with the public until the throat cultures were negative for the diphtheria bacillus and this has probably also greatly aided in the restriction of the spread of diphtheria amongst the public. The facts concerning the large percentage of positive nasal cultures, many of which show negative throat cultures, are well worthy of consideration and would indicate the necessity for taking cultures from the noses of all contacts, as well as their throats, before the house is fumigated and quarantine removed.

### DISTRIBUTION OF SUPPLIES TO CULTURE STATIONS.

The report of Mr. Harry Rush, distributor and maker of culture supplies, shows that 24,986 culture outfits were distributed during 1914 to the various culture stations. A large number of outfits was also supplied to about 65 sub-stations and various institutions and hospitals.

TABLE No. 19-Showing Distribution of Culture Outfits for	1914.
Culture tubes distributed	19,338
Culture tubes brought back	9,599
Culture tubes used and sent to the Department	4,719
Typhoid boxes distributed	<b>2,0</b> 50
Typhoid boxes used and sent to the Department	1,814
Miscellaneous outfits distributed	131
Miscellaneous outfits used and sent to the Department	70
Sputum outfits distributed	3,157
Sputum outfits used and sent to the Department	2,028
Combined blood, urine and feces culture outfits distributed	310
Combined blood, urine and feces culture outfits used and sent	
to the Department	160

### THE COLLECTION OF VARIOUS SAMPLES OF RAW FOODS.

The examination of the various specimens set forth below in Table No. 20 is made for the purpose of studying the condition of the many raw and refrigerated foods. Mr. Edward F. Kelly, the special laboratory collector, has obtained 2,270 specimens; these specimens being obtained from 1,153 dwellings, wagons, stores and dairies. His report in detail follows as Table No. 20:

TABLE No. 20—Showing the Work Done by the Collector for the Bacteriological and Chemical Laboratories.

ı	No. of
Spec	cimens.
Water, city	1,090
Water, table	14
Water, pump	4
Water, spring	41
Water, filtered	42
Milk, original package pint bottles	960
Ice, artificial	8
Ice cream	47
Oysters, shucked	30
Osyters, shell	12
Clams	22
·	
Total number of specimens	
Dairies visited	33
Dwellings visited	
. •	120
Stores visited	40
Wagons	960
Total	1,153

Examination of Control Cultures for Disinfection of Houses After Communicable Diseases.

During the year we examined 4,755 control cultures which were sent in from persons whose rooms had been disinfected by formaldehyde gas by the Department. Of these cultures 4,330 were proven to have been destroyed by the formaldehyde gas and this shows that the great majority of rooms disinfected by formaldehyde was given a thorough surface sterilization by this method.

#### SUMMARY.

The results of the examination of the water supply during 1914 show a fairly uniform bacterial reduction in the water from the storage reservoirs and the city taps, as compared to the raw water of the Loch Raven system. Several exceptions to these results can be noted, however, in the table. The percentage of positive tests for the presence of the colon bacillus in the storage reservoirs and the tap water shows a very great reduction when compared to the percentage of positive tests in the raw water. The results obtained from the examination of the water from the storage reservoirs and city taps of the Lake Roland system, when compared to the results from the raw water, are not as favorable nor has the colon bacillus been eliminated from the water in as large a percentage of instances. The results in detail can be seen upon examining Tables Nos. 2 and 3.

The reduction in the number of reported cases and deaths from typhoid fever shows some improvement when compared to previous years, as set forth in Table No. 4, and the various charts concerning the cases and deaths from typhoid fever also show a fair reduction since the use of calcium hypochlorite in the treatment of the drinking water.

A larger number of bacteriological examinations of milk was made during 1914 than in 1913 and the various tables found in the text show the comparison by months of the milk collected from the railroad stations, the wagons, the stores, the dairies and the lunchrooms. The results are expressed by means of the Levy bacterial index and the same deterioration in the milk is seen from the time that it leaves the railroad stations until it is sold from the stores, dairies, wagons and lunchrooms during this year as was noted in 1913.

In the examination of the milk for leucocytes and streptococci about I per cent. of the samples showed a leucocyte count and a streptococcus count over 1,000,000 per cubic centimeter. The results of the examination of market milk for the presence of the tubercle bacillus and other infectious organisms are also described in the text. These examinations show that in about 4 per cent. of the dairy farms from which the milk was examined we were able to demonstrate the presence of the tubercle bacillus and that other infectious organisms were found in a variable percentage of cases.

The examination of oysters shows that whereas the shell stock usually shows a low bacterial count and is free from serious intestinal pollution, yet the shucked stock shows a much higher bacterial count and colon bacilli are often present in large numbers. The clams show about the same bacterial count as the shell stock oysters and are free from intestinal pollution.

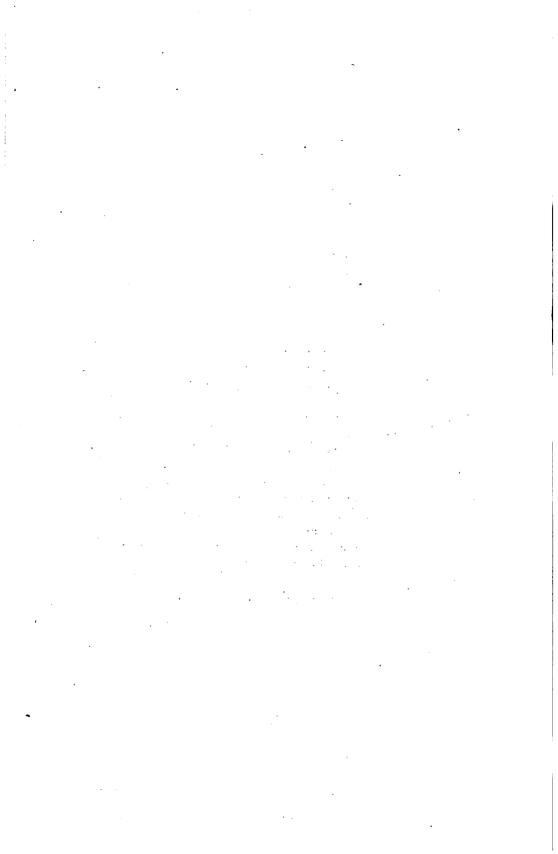
The report of the clerical sub-division shows an increased number of laboratory examinations during the year, as compared to that of previous years. This also shows some gratifying results in the use of antitoxin for the treatment and prevention of diphtheria. A fair number of complete doses of anti-typhoid vaccine was distributed during the year, but this method of preventing typhoid fever should be more extensively used.

The report of the throat inspectors shows the large number of cultures examined and also emphasizes the importance of taking cultures from the noses as well as the throats of contacts before the house is relieved from quarantine.

In conclusion I desire to thank the various bacteriologists and laboratory assistants for the faithful performance of their duties.

Yours respectfully,

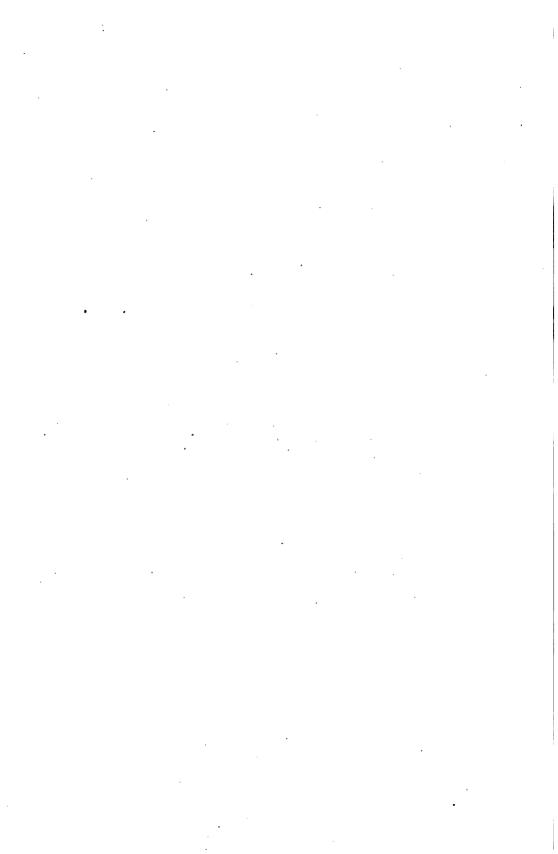
WM. ROYAL STOKES, Chief, Division of Bacteriology.



### ANNUAL REPORT

OF THE

# THROAT INSPECTORS



### Report of the Throat Inspectors.

BALTIMORE, January 1, 1915.

Nathan R. Gorter, M. D., Commissioner of Health.

### DEAR SIR:

We herewith submit a report of the work done in that division of your Department under our charge for the year ending December 31, 1914.

In all there were 8,850 cultures taken after diphtheria for fumigation; of these, 3,579 were taken by attending physicians and 5,271 by the Inspectors of Throats representing this Department.

TABLE No. 1—Cultures Taken by the Attending Physicians, 1914.

Months.	Negative.	Positive.	Unsatisfactory.	Suspicious.	Total.
January	369	139		ī	509
February	307		2	2	404
March		93 65	2	I	364
April	187	24	3		214
May	133	36	4		173
June	105	43	6		154
July	78	20	2		100
August	91	30	11	1	132
September	108	41	7		157
October	238	95	37		370
November	320	122	9		451
December	375	170	6		551
	14 11				
Grand total	2,607	878	89	5	3,579

TABLE No. 2-Cultures Taken by Throat Inspectors, 1914.

Months.	Negative.	Positive.	Unsatisfactory.	Suspicious.	Total.
January. February. March. April May. June. July. August. September. October. November. December.	630 477 352 182 272 156 94 175 310 873 700 628	65 40 8 5 4 4 6 4 31 80 57	2 2 37 16 2		695 517 360 188 276 160 100 181 343 990 774 687
Grand total	4,849	362	60		5,271

## Table No. 3—Total Number of Cultures Taken for Fumigation, 1914.

Months.	Negative.	Positive.	Unsatisfactory.	Suspicious.	Total,
January. February. March. April. May. June. July. August. September. October. November. December.	369 405 261 172 266	204 133 73- 29 40 47 26 34 72 175 180 227	2 2 4 4 6 2 13 9 74 25 8	I 2 1 I	1,204 921 724 402 449 314 200 313 500 1,360 1,225 1,238
Grand total	7,456	1,240	149	5	8,850

Table No. 4—Comparison for the Years 1912, 1913 and 1914 of Total Number of Cultures Taken for Fumigations.

YEARS.	Negative,	Positive.	Unsatisfactory.	Suspicious.	Total.
1912. 1913. 1914.	7,299	623 1,676 1,240	149	 5	5,098 8,975 8,850

The striking difference in the percentage of positive cultures taken by attending physicians for disinfection over those taken by the Inspectors of Throats is due to the fact that in most instances the attending physician takes a culture from the throat of the patient only, with the request that if the culture be found free from diphtheria bacilli the Department take the cultures from the other inmates of the infected house. So in a large majority of cases this Department takes a culture from the throat of the patient after the throat has already been proven free of diphtheria bacilli.

Believing that in a large percentage of the diphtheria cases the organism can be found in the nose as well as within the throat, we have during the past three years made it a rule to take a nose as well as a throat culture from the patient only. Of these nose cultures 1,193 were taken, of which 1,112 were negative and 81 positive. This result shows that 14 per cent. of the patients convalescent from diphtheria and reported to this Department, as well as by the attending physician, still harbor diphtheritic germs in their anterior nares, and upon investigation we find that in about 10 per cent. of the above positive nose cultures the throat culture taken at the same time was negative.

We believe that the very high percentage of positive nose cultures would seem to indicate the necessity of a routine examination of a diphtheritic patient's nose as well as his throat before lifting the quarantine, and would respectfully offer this suggestion to apply to the cultures taken by the attending physician as well as those taken by the Throat Inspectors.

We believe from the above statistics and from experience that one negative culture from a throat is by no means positive evidence that diphtheria germs are not present. If practicable, two negative cultures from both nose and throat should be taken on two successive days. The percentage of error in culture taking, we think, is high enough to justify this regulation. The principal causes of error in culture taking are: carelessness or, in an intractable child, inability to touch with the swab every part of the throat.

A culture taken from the surface of the throat may be negative, due to an antiseptic gargle or spray; again, the germs may be only lodged in the follicles or crypts of the tonsils. After some little time the germs may be squeezed out of the follicles (as after eating) and again appear in the throat, at which time we would get a positive culture.

The germs may be in the anterior or posterior nares at the time the culture was taken and the throat negative and a culture taken the next day would give a positive result.

The swab may not be rubbed carefully enough over the blood serum. The blood serum may not be slanting enough to catch every part of the swab as it is twirled, and in this way the germs may remain on the swab and never come in contact with the blood serum.

Bad or dry media.

A swab already contaminated by careless handling.

Incubator trouble may delay the growth,

Unavoidable errors in staining and examining.

In view of the above causes, some of which are unavoidable, while others may be due to negligence or carelessness, we respectfully submit for your approval the necessity and practicability of this Department requiring two negative cultures from both nose and throat of a diphtheritic patient before that patient is released.

Respectfully submitted,

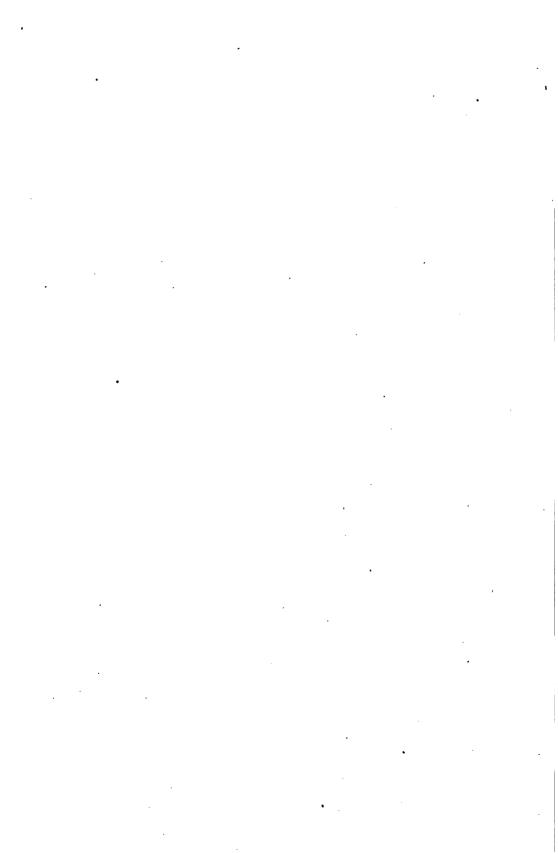
B. P. HERZOG, M. D.,
GUSTAV H. WOLTERECK, M. D.,
Throat Inspectors.



## ANNUAL REPORT

OF THE

Bureau of Food and Dairy Inspection



### Report of the Bureau of Food and Dairy Inspection.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D.,

Commissioner of Health.

DEAR SIR:

I have the honor to submit herewith a report of the work accomplished in the Bureau of Food and Dairy Inspection for the year ending December 31, 1914.

### ORGANIZATION.

On January 1, 1914, the Bureau of Food and Dairy Inspection was organized, according to a plan of organization submitted by the present Chief of the Bureau. This plan concentrates all of the food work of our Department under the Bureau of Food and Dairy Inspection. This Bureau is divided into two main divisions, a Division of Inspection and a Division of Laboratories. The Division of Inspection is in charge of the Chief Inspector. All food inspection work is included in this Division and comprises city milk inspection, dairy farm inspection, bakery inspection, abattoir inspection, general food inspection and the supervision of pasteurizing dairies. Including the Chief Inspector, 21 men are now enrolled in the Division of Inspection. The Division of Laboratories comprises the Chemical Laboratory and the Bacteriological Laboratory in so far as the latter is concerned with food analyses. The technique of the bacteriological food work is under the immediate supervision of Dr. William Royal Stokes, Chief of the Division of Bacteriology, but the character and amount of

work in this laboratory are directed by the Chief of the Bureau of Food and Dairy Inspection.

The plan of organization which was presented provided for an Assistant Chief of the Bureau of Food and Dairy Inspection who was to be, in addition, the Chief of the Division of Laboratories. An Assistant Chief Inspector was also suggested, who was to be Assistant Chief of the Division of Inspection. Neither of these positions was created, so that the more efficient working of the Bureau was somewhat hampered by the imposition of the duties of these positions on the Chief of the Bureau and the Chief Inspector. Notwithstanding these gaps in our organization, I believe that the formation of this Bureau marks a very important step forward in our control of the food situation in Baltimore. This Bureau is the first to be organized within this Department, and the success already attained augurs well for the success of a reorganization of the entire Department along bureau lines.

The office work is under the immediate control of the Chief of the Bureau. By this plan of organization, full responsibility for the food administration rests with the Bureau of Food and Dairy Inspection, both as regards the inspection and analysis of foodstuffs. I believe that this concentration of work and authority under one responsible head will undoubtedly be productive of greater efficiency in dealing with the increasing problems incident to our food distribution.

### MILK.

The amount of milk received at the various railroad stations during 1914 was 9,723,718 gallons, an increase of 377,857½ gallons over the amount received during 1913, which is an approximate increase of over a thousand gallons a day, as received by this means of transportation. However, the amount of milk produced within hauling distance of the city has decreased to about 5,000 gallons per day, so that the approximate average daily consumption of milk is about 32,000 gallons.

This approximate daily consumption of milk in 1914 shows no appreciable increase over the average daily consumption in 1913. Considering the natural growth of the city in population during the year, it is evident that there has been a decreased consumption of milk, a fact which has been verified by inquiry among the dairymen as to the daily demand for milk. This decrease is due probably to the industrial conditions and the outbreak of foot and mouth disease.

In Table No. I are shown the amounts of milk received monthly at the various railroad stations during 1913 and 1914. Acknowledgement is hereby made of the courtesy and cooperation of the various railroad companies in furnishing this and other data.

TABLE NO. I—Showing the Amount of Milk in Gallons Received Each Month at the Various Railroad Stations During

W. M. R. R. Fulton Station. 133,070 119,702 142,566 145,869 113,711 129,953 156,589 166,604 173,725 195,523 148,164 1,748,393 1913. 109,777 106,988 118,996 117,646 108,618 153,130 154,483 150,068 146,589 132,561 1,506,977 101,212 1914 W. M. R. R. Hillen Station. 1,268,645 131,925 102,351 112,768 84,385 107,400 114,113 101,594 114,837 104,341 104,811 89,711 1913. 230,702 237,990 252,756 259,292 239,398 213,206 2,837,867 233,317 234,023 221,222 171,121 Md. & Pa. R. R. Oak St. Station. 1914. 1913 and 1914. 221,242 258,888 244,796 226,871 226,164 224,469 200,477 184,444 213,778 214,324 2,672,157 229,139 1913. B. & O. R. R. Camden, Gay St., and Mt. Royal Stations. 135,374 119,894 108,338 107,248 95,569 93,669 105,575 114,363 1,302,519 103,353 88,341 86,518 1914. 1,214,325 88,785 96,255 96,255 101,320 132,055 109,580 103,065 85,280 88,170 1913. Total..... May..... une..... fanuary..... March..... November..... September February..... MONTHS. October..... December..... uly August April.....

i i	W. M. R. R.	2	5	2	6	7. 17. 17.	Martin Co.
Months.	Fulton Station,	Calvert Station	K. K. Station.	President St. Station.	Station.	Monthly All Rai	Montnly Totals for All Railroads.
	1914.	1913.	1914.	1913.	1914.	1913.	1914.
Tanuary.	115,818	174,674	174,802	2/922'01	12,111	752,4961/2	735,902
February	109,646	167,432	165,231	9,984	10,747	655,452	691,064
March	118,925	190,260	186,625	11,4361/2	12,465	747,4541/2	771,357
April	115,904	190,644	182,342	12,5791/2	14,437	740,1231/2	786,790
May	128,912	219,137	212,548	12,651	18,007	891,720	020,700
June	127,449	209,290	213,754	18,4741/2	18,545	877,8691/2	872,060
July	117,670	204,308	205,352	17,8161/2	18,030	833,89472	808,962
August	165,889	203,191	197,903	16,8161/2	16,588	869,0111/2	875,165
September	167,356	184.724	190,673	14,093	14,445	787,856	868,228
October	162,573	183,613	178,225	13,1001/2	12,135	758,9081/2	827,576
November	158,805	170,560	161,876	11,832	10,470	691,409	779,287
December	171,197	177,457	177,000	11,870	018,11	748,667	800,257
I T				7,100, 33	200 07-	/1-70	0-4 354 6
1 Otal	1,000,144	2,2/5,290	2,240,331	100,430%	109,000	9,345,000/2	9,723,710

#### DAIRY FARM INSPECTION.

Our dairy farm inspection force was increased by the addition of three men during the year, which now brings our total number of dairy farm inspectors up to six. With this number of inspectors, we are now in a position to thoroughly and systematically inspect the various dairy farms supplying milk to Baltimore city, and the methods of handling milk on these farms. During the year 1,458 farms were visited, as against 1,000 in 1913, and a total of 3,820 inspections were made of these farms, as against 1,548 in 1013. Two hundred and thirty-one of these inspections were made on 160 farms, and were special investigations following high counts in bacteria, streptococci and leucocytes. As a result of the instruction by our dairy farm inspectors and co-operation of the milk producers, the source of the trouble was probably eliminated on 141 of these farms and the remainder of the investigations could not be concluded on account of the confusion during the period of moving from the old to our present new quarters. The milk from four of these farms was excluded from the city, but two of them were allowed to resume shipment after the cause of trouble had been corrected. The veterinary examinations in these investigations show 196 cows nearly dry; 177 cows milked too soon after parturition; 40 sore udders, due to bruises, etc.; 15 cows sick with pneumonia, tuberculosis, etc.; 12 cases of abortion, and 25 cases of garget. As a result of these special investigations, the milk from 156 cows on these farms was excluded temporarily. As part causes of the high bacterial count, there were found: dirty utensils in 21 investigations; dirty dairies in 14; dirty stables in 46, and dirty barnyards in 36.

During the latter part of the year an outbreak of the foot and mouth disease occurred in various parts of the State of Maryland. Fortunately, only two farms supplying Baltimore city were infected with this disease, and these farms were promptly quarantined and the cattle slaughtered.

In general, the conditions on our producing farms have shown improvement, especially in the building of new barns and the remodeling of old ones. There is an increase in the percentage of farms using milk coolers and a decrease in the percentage of farms having no dairy house. Both of these conditions tend to show improvement. The percentage of farms using small-top milking pails is lower than the figure for 1913. This condition is one demanding prompt and vigorous action ' by our Department, and instructions will accordingly be issued to our inspectors requiring all farms to use the small-top milking pail. The necessity for the use of this type of pail is evident and should materially assist us in improving the quality of milk from our dairy farms. It is a regrettable fact that only 42 or 2.76 per cent. of the farms visited have tuberculintested herds. The importance of having milk from herds free from tuberculosis is of special interest from a health and economic standpoint. At the present time no steps are being taken by our State to prevent the spread of this disease, nor is there any regulation governing additions to dairy herds. Unless both of these latter conditions are met, it will be exceedingly difficult to do much effective work to prevent the spread of this disease in our dairy cattle. At the present time it does not seem practicable for Baltimore city to insist upon the tuberculin-testing of the dairy herds supplying the city with milk, so that the only safeguard which we can use against this disease is the proper pasteurization of our milk supply.

In Table No. II is shown the grouping of our dairy farms according to scores. Of these scores 75 per cent. scored between 40 and 60. The average score of farms was 49.16, as compared with 50.84 in 1913. This decrease in the average score is due, however, to the use of a new form of score-card, on which the system of scoring is more exact.

TABLE No. II-Showing Grouping of Dairy Farms by Score.

Score.	Number.	Percentage
Over 80	7	0.46
Between 70 and 80	7	0.46
Between 60 and 70	101	6.66
Between 50 and 60	500	33.53
Between 40 and 50	630	41.50
Between 30 and 40.	134	8.83
Between 20 and 30	7	0.46
Below 20.	,	0.13
Incomplete	121	7.97
•		i
Total	1,518	100.00
Number having tested herds	42 120	2.76 7.90
Number having coolers	125	8.23
Number having no dairy house	•	
Number having no dairy house	332	21.87
Maximum score		
Minimum score		12.4

Daily reports of contagious and infectious diseases have been received from the State Department of Health. As a result of these reports 15 investigations were made on account of the presence of these diseases on farms shipping milk, and as a result, there were two temporary exclusions of milk from Baltimore city, until all danger of infection was ended. These reports have been of great value to our Department, but their value could be further enhanced by a change in the method of reporting infectious diseases to the State Department of Health. At the present time we have no means of ascertaining whether or not a reported case is on a producing farm, unless the name corresponds to that of one of our shippers.

Under these conditions cases of disease may exist among the employes on these farms without coming to the notice of this Department. This objection can be overcome by the State Department of Health by the insertion of suitable items in the form of report used by attending physicians for such cases. Another source of difficulty is the lateness with which some physicians report their cases. Under the new system of organization proposed for the State Department of Health for next year, it would materially assist our Department if the district health officer would quarantine all farms on which infectious diseases occur and on which it would not be possible to safely permit the continued shipment of milk, pending the duration of the particular disease.

There has been a further reduction in the number of nearby farms hauling milk into the city. At the end of the year 105 farms were producing milk within a short hauling distance of the city. This is a decrease of 11 for the same class of producers in 1913.

The regulation regarding slop feeding which was formulated by the Commissioner of Health in 1913 has not come up for settlement in the courts. Until a decision is rendered on the validity of this regulation, our hands are practically tied in correcting the abuses due to the insanitary practice of such feeding.

### CITY MILK WORK.

As pointed out in previous reports, the store question and the distribution of bulk milk by stores and wagons still continue to be among the serious problems in our distribution of milk. Attention must again be directed to the inadequacy of our laws governing the sanitary condition of these establishments as well as to the necessity for the prohibition of the sale of loose or bulk milk, except under certain special conditions.

The equipment and sanitary condition of dairies must also receive most careful attention, and as a result of our study of local conditions, a new set of dairy regulations will be issued in the early part of the coming year.

The plan for handling the revocation of milk permits in the city, as outlined in our report of 1913, has been followed throughout the year. This plan has worked out satisfactorily and has served to impress on the holders of permits the necessity for a strict compliance with our existing regulations. During the year 171 permits for the sale of milk were temporarily revoked on account of violations of our rules and regulations governing the handling of milk; 24 revocations were made permanent, so that at the present time there are 37 revocations of milk permits in Baltimore city, which revocations are permanent. On December 31, 1914, thirty-nine hundred and five permits for the sale of milk were in operation, these including stores, dairies and lunchrooms.

Chart No. 1 shows the distribution of milk by the dairies. The fact that the ten largest dairies only distribute a little more than 50 per cent, of the total distribution directs our attention to another source of difficulty surrounding our local distribution of milk. It is interesting also to note that six dairies are now distributing bottled milk only, whereas three distributed bottled milk only during 1913. In 1914, twenty-two dairies distributed loose milk only, whereas in 1913 there were only ten dairies distributing loose milk only. This increase in the number of dairies distributing loose milk only is regrettable, but can only be overcome by a suitable law regulating this practice. The remaining dairies distribute both bulk and bottled milk. Our largest pasteurizing dairies are included in this group and yet the amount of bulk milk distributed by these dairies is comparatively small, compared to the total volume of their output.

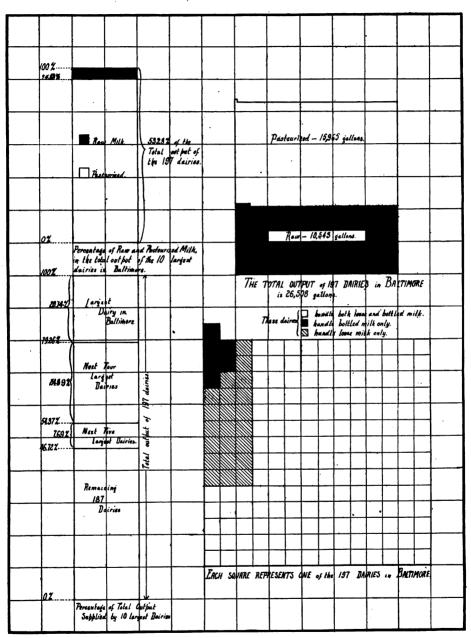


CHART No. 1.

Table No. III contains a summary of the work accomplished by our milk inspectors during 1014. Of the total amount of milk received at the railroad depots, only 5.2 per cent. was inspected. This is a decrease of nearly I per cent. in the amount of milk inspected, as compared with 1913, and is due to the fact that in the increase of the number of bacteriological samples taken at the depots, our inspectors are not able to inspect as many cans of milk as formerly. During the year 6,659½ gallons of milk were condemned and returned to the producer. Up to this year it has been the practice of the Department to destroy all milk which had been condemned as unfit for use. This practice resulted in a great deal of criticism and naturally aroused much opposition on the part of the milk producer. In order to overcome these objections it was suggested by the United States Department of Agriculture that a solution of rennin be added to condemned milk so that the milk could be utilized for stock feeding purposes. The purpose of this addition of rennin is to coagulate the milk and thus render it unfit for human consumption as milk. This suggestion of the government department was adopted by our Department in the early part of the year, and has been in constant use since that time. It is gratifying to report that no criticism has been heard of this method of handling condemned milk.

Table No. III-Showing Amount of Work Done by Milk Inspectors, by Months, During 1914.

Railroad	Wagon Railroad Inspec- Depots tions. Visited.			134	134	135	158	191	144	126	163	121	. 137	1,666
Wagon				552	379	343	220	25	57	274	416	351	467	4,201
Shop			557	1,016	820	897	685	1,054	1,025	626	1,051	795	<b>9</b> 8	10,362
Dairy and Milk Inspections.	Lunch- rooms.	261	153	506	156	158	143	82	93	911	16	64	8	1,534
	Dairies.	131	102	133	128	001	229	428	261	202	555	515	119	2,700
Amount of	Amount of Milk Condemned. (Gals.)			31834	914	1,071	792	8	38634	. 239	300	563	569	6,6591/2
	Amount of Milk Examined. (Gals.)			49,598	50,657	48,195	48,125	36,730	36,275	36,750	44,380	36,333	43,315	510,728
Amount of Milk	Amount of Milk Received at Depots. (Gals.)			771,357	786,790	020,700	872,060	808,962	875,165	868,228	827,576	779,287	800,257	9,723,718
22	Aonths. Re				April	May	June	Inly	August	September	October	November	December	Total

Whenever a case of infectious or contagious disease occurs on a premise where milk is sold, the permit for the sale of milk or cream from that premise is temporarily revoked until all danger of infection is over. The number of these quarantines is presented in tabular form in Table No. IV.

Table No. IV—Showing Number of Places Quarantined on Account of Communicable Diseases, by Months, During 1914.

. Diseases.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Typhoid fever Scarlet fever Diphtheria Measles Tuberculosis Foot and mouth dis-	 2 I 2	 3 1	 3 	 I 	I  I	3 1  1	I  I	2 I 	I 2 	 2 	2 1 5 	3  1 1	13 10 16 6 2
Total for year	 5	5	4	1	3	6	2	3	3	4	8	5	49

Table No. V shows the incidence of infectious diseases on the routes of the various distributing dairies. The total number of cases considered in this table is 262 less than in 1913. This decrease in the total number of cases is due to the decrease of typhoid and scarlet fever cases, the former amounting to 196, and the latter to 109. An increase of 41 cases of diphtheria is noted, as compared with 1913.

Table No. V—Showing Cases of Communicable Diseases Reported on Dairymen's Routes, by Months, During 1914.

Months.	Diphtheria.	Scarlet Fever.	Typhoid Fever.	Total.
January	85	46	   11	142
February	71	53	2	126
March	65	69	5	139
April	<b>2</b> 9	6ó	4	93
May	32	27	17	76
June	26	46	33	105
July	23	27	39	89
August	42	14	67	123
September	56	8	97	161
October	90 86	12	60	162
November	86	28	56	170
December	109	. 60	50	219
Total	714	450	441	1,605

Tables Nos. VI to IX give the average percentage of butterfat and total number of samples above and below the legal standard for station, wagon, store and lunchroom samples. Each of these tables shows an improvement in the percentage of butterfat as compared with the same type of samples collected during 1913 and are the highest figures yet recorded in the history of our Department. This improvement is further noted in the percentage of the different types of samples falling below the legal standard, as noted in the following summary:

Per	Cent.	of	Samples	Below	Standard	of	3.5	Per	Cent.
-----	-------	----	---------	-------	----------	----	-----	-----	-------

YEAR.	Station.	Wagon.	Store.	Lunchroom.
1913		27.8	43.I	29.9
1914		22.9	34.4	25.0

The improvement in the wagon, store and lunchroom samples is due, to a considerable degree, to the system inaugurated in the month of April by which samples of milk collected from distributing wagons were all sealed samples, as required by the law whenever a prosecution was to be instituted. I believe that this method has influenced the distributing dairyman to exercise greater care in the handling of the milk, so far as preventing loss of butterfat is concerned, and has also influenced them to hold the producers accountable for the shipment of milk in accordance with our legal standard.

TABLE No. VI-Record of Station Samples, 1914.

Months.	Per Cent. Fat.	Number Above Legal Standard.	Number Below Legal Standard.	Total.
January. February. March. April. May. June. July. August. September October November. December	4.00 4.08 3.92 4.01 3.98 4.09 4.06 4.21 4.45	1,114 854 1,074 810 772 790 446 947 733 931 543 779	140 123 133 174 172 134 42 130 82 41 29	1,254 977 1,207 984 944 924 488 1,077 815 972 572 823
Average and total	4.12	9,793	1,244	11,037

TABLE No. VII-Record of Wagon Samples, 1914.

Months.	Per Cent. Fat.	Number Above Legal Standard.	Number Below Legal Standard.	Total.
January. February. March April May. June. July. August. September October November. December	3.81 3.82 3.75 3.78 4.10 3.73 3.98 3.92	396 214 207 79 67 77 13 22 102 166 144	132 95 88 28 29 17 2 4 20 24 27 20	528 309 295 107 96 94 15 26 122 190 171 162
Average and total	3.86	1,629	486	2,115

### TABLE No. VIII—Record of Store Samples, 1914.

Months.	Per Cent. Fat.	Number Above Legal Standard.	Number Below Legal Standard.	Total.
January. February. March. April. May. June. July. August. September. October. November. December.	3.65 3.48 3.69 3.63 3.61 3.68 3.73	124 128 261 219 195 309 194 222 283 355 231	77 53 133 140 167 224 114 89 131 167 83	201 181 394 359 362 533 308 311 414 522 314
Average and total	3.67	2,775	1,455	4,230

TABLE No. IX—Record of Lunchroom Samples, 1914.

Months.	Per Cent. Fat.	Number Above Legal Standard.	Number Below Legal Standard.	Total.
January	3.78	123	36	159
February	3.59	23	12	35
March	3.91	109	44	153 162
April	3.81		44	
May	3.89	95	46	141
une	3.71	100	42 10	142
July	3.75	34		44 66
August September	3.94	49 81	17	
October	411	60	10	97
November	4.20 3.80	36	7	72
December	4.00	61	12	43
Average and total	3.87	889	298	73 

### PASTEURIZING DAIRIES.

The past year marks a still further increase in the number of pasteurizing dairies operating in our city. At the end of the year there were 28 pasteurizing dairies as compared with 19 such plants in 1913. Of these 28 dairies 10 are using the holding, and 18 the flash system of pasteurization. All the dairies using the holding system are exposing the milk for periods of from 20 to 35 minutes, at a temperature of 140 to 145 degrees Fahrenheit. The nine new pasteurizing dairies all installed the flash system of pasteurization. The continued increase in the number of pasteurizing dairies emphasizes the necessity for an ordinance regulating and defining the process of pasteurization. This is further emphasized by the fact that the recent pasteurizing dairies are installing the flash type of pasteurizer. It is now clearly recognized by authorities that the holding type of pasteurizer is the only satisfactory and

reliable type of pasteurizing apparatus. Proper pasteurization is the best safeguard that any city can have in its efforts to distribute a safe milk supply, and so it is imperative that our Department be given the proper legal authority to effectively control the installation and operation of pasteurizing plants. The difficulties already encountered and objectionable features noted in our pasteurizing plants were detailed in our 1913 report. The conditions there learned and followed by a more detailed study of these plants in 1914 has furnished us with the necessary data on which to base our pasteurization requirement. I cannot express too strongly the urgent necessity for the prompt formulation of suitable regulations to control this important process.

During the latter part of the year an investigation was conducted to determine the efficiency of the various pasteurizing plants. Whereas, there were 28 pasteurizing dairies, we were only able to conclude our investigations of 21 at the end of the year. Table No. X gives the result of this study in the bacterial counts of the raw milk, the pasteurized milk prior to bottling, and the bottled milk as delivered to the consumer. From this data the efficiency of the various dairies can be readily determined. This table summarizes the bacterial counts of the routine pasteurized milk examinations of the bacteriological laboratory and simultaneously compares the classified results of our special examinations.

It will be noted that the bacterial counts, with few exceptions, agree in both investigations. Of the "Raw Milk" examinations, 17 of the 21 dairies, or 81 per cent., are below our bacteriological standard of 500,000 bacteria per cubic centimeter for raw milk. Of the "Milk After Pasteurization" examinations, 19, or 90 per cent., of the dairies showed counts below our standard of 50,000 bacteria per cubic centimeter for pasteurized milk.

However, when the bacterial count of the original package is observed, it is obvious that contamination has occurred be-

tween the time of pasteurization and delivery, or that a rapid development of the bacteria present in the pasteurized milk has taken place. Only 6, or 20 per cent., of the dairies show counts below our standard for pasteurized milk, as delivered to the consumer. This decrease of 61 per cent. can be attributed to two primary causes. The first is dirty bottles. In this investigation the bottles were examined by rinsing them with 10 cubic centimeters of sterile water and making a bacterial count of this entire volume. This count determines the number of bacteria adhering to the sides of the bottle and is expressed as "Bacteria per Bottle." Assuming that a count of 1,000 bacteria per bottle represents a fairly clean bottle, it will be seen that 13 of the 21 dairies, or 62 per cent., were using dirty bottles. This figure agrees closely with the percentage of dairies exceeding the bacterial standard for pasteurized milk. This strikingly illustrates the necessity of insisting, as far as practical means are concerned, upon a sterile bottle or container.

The second, and no less minor consideration, is the type of refrigerator employed for the storage of milk after bottling. Only eight of the 21 dairies have efficient refrigerators. It is the practice with many of the dairymen to dispense with the use of ice during the winter months and to rely upon the atmospheric temperature for refrigeration. The result is that on some days the temperature is sufficiently low to check bacterial growth, while on others it may be high enough to cause marked increase in the bacterial count. Therefore, it is essential to provide an adequate storage temperature for the milk.

While the examination of the bacterial counts for "Milk After Pasteurization" shows a fairly efficient pasteurization on the one hand, on the other it emphasizes the necessity for automatic regulation of the temperature at which the pasteurization is conducted. Mention is made of this because the results obtained show wide variations in counts.



•

In October a new line of work was begun in connection with and supplemental to the work of the supervision of pasteurizing dairies. The object of this work is not only to determine the numerical bacterial count or quantitative examination, but also the differential bacterial content or qualitative examination. Milk may comply with the quantitative requirements of a regulation and still be dangerous by containing a pathogenic organism.

These 28 dairies have a total daily output of 16,966 gallons of milk and 623 gallons of cream. Of the total amount of milk produced by these dairies, 14,692 gallons are bottled, and 2,274 gallons are delivered in bulk. For details of the bacteriological examinations of milk from the pasteurizing dairies, the reader is referred to the report of the Division of Bacteriology.

Table No. XI shows the summarized bacteriological data on our various types of milk, exclusive of pasteurized milk. The increase noted in the average bacterial count for each class of milk, as compared with the corresponding figures for 1913, is probably due to the large increase in the number of samples examined and to the high temperature conditions which prevailed during the summer months. This factor is especially noticeable in the averages for the months of May, June, July, August, September and October. The results in the remaining months of the year compared favorably with the results obtained during the same period of the preceding year.

During	Deaths 2 Years of Age and Under Due to Intestinal Diseases.	9 6 10 11 13 13 13 14 15 15	564
	Deaths 2 Years of Age and Under.	163 185 209 188 188 175 141 305 204 171 179	2348
by Months	Air Temperature,	37.6 39.5 39.5 39.5 76.8 66.8 66.8 33.4	:
by N	Average Temperature (Milk).	28.44.38.33 25.44.93.34.65.55.44.65.55.55.55.55.55.55.55.55.55.55.55.55.	
	Minimum Temperature (Milk).	888842824428	:
Collected	Maximum Temperature (Milk).	82424244428	<u>:</u>
Samples (	Average Bacterial Count.	573,800 173,800 535,300 1,209,700 2,421,800 4,062,000 6,615,900 6,615,900 5,111,900 3,335,800 3,415,000 6,445,000 6,22,500	1,872,547
Milk	Minimum Bacterial Count.	2,000 1,000 1,000 5,000 1,000 10,000 10,000 10,000 1,000 1,000	
Various Types of -Stations.	Maximum Bacterial Count.	13,000,000 6,000,000 18,000,000 60,000,000 130,000,000 130,000,000 75,000,000 75,000,000 75,000,000 100,000,000 32,000,000 80,000,000	
Various ?——Stations.	Number of Samples Above 10,-	1 1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	221
7 Z	Number of Samples Between 5,000,000, and 10,000,000.	11 13 13 14 14 14 14 16 16 16 16	371
<i>ita on</i> 1914-	Number of Samples Between 3,000,000 and 5,000,000.	41 00 62 3 3 0 0 1 1 2 4 8 3 3 5 1 2 3 4 5 5 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	290
ıl Do	Number of Samples Between 1,000,000 and 3,000,000.	22 10 10 116 116 116 116 116 116 119 119 119 119	678
Bacterial Data on 1914.–	Number of Samples Between 500,-	24 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	542
	Number of Samples Above 500,000.	73 36 129 225 225 249 376 186 145 145 123 123	2102
arize	Number of Samples 100,000 or Under.	210 320 596 266 91 71 71 33 25 53 150 481	2810
Summarized	Percent of Samples Under 500,000.	80.6 92.1 71.0 50.9 50.9 47.1 33.1 33.1 38.2 47.7 88.3 88.3	68.31
	Number of Samples 500,000 or Under.	313 422 796 552 253 254 263 92 132 354 6641	4532
howi	Number of Samples Examined.	386 458 925 777 503 639 123 777 713 764	6634 4532 68.31 2810 2102
Table No. XI-Showing	Months.	January February March April May June July September October November December	Total

TABLE NO. XI (Continued)—Showing Summarized Bacterial Data on Various Types of Milk Samples Collected by

Due to Intestinal Diseases. Deaths 2 Years of Age and Under Deaths 2 Years of Age and Under. Air Temperature. Average Temperature (Milk). 888884444488 Minimum Temperature (Milk). 844884488848 Maximum Temperature (Milk). 2,576,700 736,600 3,584,700 5,152,500 ,004,100 5,290,000 7,426,000 3,603,200 4,407,047 ,222,000 5,736,500 5,072,000 Average Bacterial Count. 30,000 270,000 10,000 10,000 20,000 10,000 20,000 10,000 Minimum Bacterial Count, 37,000,000 8,000,000 70,000,000 60,000,000 90,000,000 33,000,000 33,000,000 55,000,000 66,000,000 66,000,000 66,000,000 250,000,000 Months During 1914.—WAGONS. Maximum Bacterial Count. 000000 0 H H 75 2 .000,000 114 Number of Samples Above 10,-120 5,000,000 and 10,000,000. v - 2∞ r 40 c 4 4 r r Between Samples ΙO Number 112 3,000,000 and 5,000,000. 4 4 7 % G H H R R R R & Q Samples Between ΙO Number 1,000,000 and 3,000,000,1 195 402877-95170 Between Samples Number ΙO 41101050509 .000,000,I bns 000 131 Number of Samples Between 500,-672 Number of Samples Above 500,000. 53312 63 0 1 5 10 5 5 5 5 5 5 Under. 192 Number of Samples 100,000 or 44.27 25.0 25.0 25.0 28.0 28.0 28.0 40.0 25.8 34.4 65.0 77.4 Percent of Samples Under 500,000. 8 8 8 8 8 534 Number of Samples 500,000 or 1206 Number of Samples Examined. anuary..... December..... February March.... April..... May..... une..... uly..... October ovember..... August September.... Total

ь Due to Intestinal Diseases. Deaths 2 Years of Age and Under TABLE No. XI (Continued)—Showing Summarized Bacterial Data on Various Types of Milk Samples Collected Deaths 2 Years of Age and Under. Air Temperature, Average Temperature (Milk). 3888884444688 Minimum Temperature (Milk). 884868488488 : Maximum Temperature (Milk). 10,199,800 5,820,000 20,000 10,068,800 110,000 12,900,000 9,132,700 12,751,600 9,220,600 6,143,821 Average Bacterial Count. 3,000 000'01 0000 0000 000,0 000,00 20,000 00000 :::: Minimum Bacterial Count, 30,000,000 130,000,000 24,000,000 00,000,00 20,000,000 40,000,000 30,000,000 70,000,000 000,000,00 Months During 1914.—STORES. Maximum Bacterial Count. 4458588588444 808 .000,000 Number of Samples Above 10,-5,000,000 and 10,000,000. N4NUNCVNV4H0 80 Between Samples Number ìo 3,000,000 and 5,000,000. 7 E 2 G 2 7 E 4 G E O 2 117 Between Samples ΙO Иитрет 1,000,000 and 3,000,000.1 8 78 6 8 8 4 V 8 V H 8 8 Between Samples Ιo Number 000400-40000 8 .000,000,1 bas 000 Number of Samples Between 500,-4448882284511 741 Number of Samples Above 500,000. 174 Under. Number of Samples 100,000 or 62.5 65.1 18.5 13.9 13.9 12.9 25.0 25.0 17.7 63.3 63.3 64.5 36.2 Percent of Samples Under 500,000. 484 420 1010 1010 1010 1010 62 Under. Number of Samples 500,000 or 1160 \$ 8 10 Number of Samples Examined. anuary..... February..... March.... April..... October November.... December..... September uly..... August May..... une..... MonTHS. Total

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LE NO	

	Deaths 2 Years of Age and Under. Due to Intestinal Diseases.		:
	Deaths 2 Years of Age and Under.		:
	Air Temperature.		:
	Average Temperature (Milk).	04 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	:
	Minimum Temperature (Milk).	4 % % % % % 4 % % % . : .	:
	Maximum Temperature (Milk).	00 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Average Bacterial Count.	5,397,000 1,285,100 3,213,000 7,572,800 24,493,400 8,346,000 11,943,300 17,755,625 6,096,000	7,390,648
s.	Minimum Bacterial Count.	170,000 20,000 10,000 30,000 10,000 90,000 90,000	
1914.—LUNCHROOMS	Maximum Bacterial Count.	21,000,000 15,000,000 15,000,000 90,000,000 700,000,000 60,000,000 100,000,000 60,000,000	
4-I	Number of Samples Above 10,- 000,000.	13 20 13 13 17 17 17	8
161 g	Number of Samples Between 5,000,000 and 10,000,000.		88
During	Number of Samples Between 3,000,000 and 5,000,000.	3 17 17 10 10 10 10	73
ths 1	Number of Samples Between 1,000,000 and 3,000,000.	£22,24,24,24,24,24,24,24,24,24,24,24,24,2	104
Months	Number of Samples Between 500,-	1 2 0 0 0 1 1 2 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	43
	.coo,ooz svodA salqms2 to radmuN	31 2 2 4 2 8 4 8 4 8 8 4 8 8 9 8 9 8 9 8 9 8 9 8 9	387
	Number of Samples 100,000 or Under.	0 7 4 2 0 0 4 4 H H	III
	Percent of Samples Under 500,000.	20.0 67.0 67.0 67.0 33.0 5.7 5.7 5.7 10.2 18.4	39.81
	Number of Samples 500,000 or Under.	428 404 250 V	256
	Number of Samples Examined.	01 4 8 2 4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	643
	Months.	January. February. March. April. May. June. June. August. September. October. November*	Total

Chart No. 2 graphically portrays the percentage of samples between various bacterial counts for the years 1912, 1913 and 1914.

#### BAKERY INSPECTION.

Table No. XII shows the number of bakery inspections and number ordered cleaned, by months, throughout the year. In general, the conditions in our bakeries are fair, but entirely too great a proportion of them are still operating in underground establishments. It is highly desirable that a reasonable and effective bakery ordinance be established to correct existing conditions and to formulate suitable regulations for the conduct of such establishments.

TABLE No. XII-Showing Bakery Inspection by Months During 1914.

Months.	Bakeries Examined.	Bakeries Ordered Cleaned.
January. February. March April May June July August September October November December	277 294 284 247 278 279	5 6 7 6 7 9 51 4 5 6 6 7
Total	3,169	119

# ABATTOIR AND SLAUGHTER-HOUSE INSPECTION.

What was said in our 1913 report under this heading is equally applicable this year. By far the greater percentage of our local plants are not under United States Government inspection. Our State also has no system of inspection. Under

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these conditions the inspections of all these establishments falls to the duty of one inspector. Obviously, many carcasses are now slaughtered without any inspection whatever and the consumer has to rely on the honesty of the proprietor in excluding diseased carcasses from the product of the plant. slaughtering of all animals intended for human consumption should be under the most careful supervision, and all carcasses passing such inspection should bear a suitable inspection stamp. I therefore recommend that a suitable ordinance be drafted to cover the equipment and sanitary condition of these plants, requiring that all carcasses or parts of carcasses exposed for sale in the City of Baltimore shall come from plants under either government or municipal inspection. order to carry out the details of such an ordinance and to better protect our citizens, an increase in our inspection force is urgently needed.

#### GENERAL FOOD INSPECTION.

Table No. XIII shows the number and character of the inspections made by the food inspectors, by months, during the year 1914. A classification of the various foodstuffs condemned in these inspections, as well as by the abattoir inspector, will be found in Table No. XV. With only three food inspectors available for general food work in the city it is apparent that much needed inspection work must necessarily be left undone. Consequently, such important food-dispensing establishments as hotels, restaurants, lunchrooms, eating-houses are non-inspected, both as to the quality of foodstuffs sold as well as to the sanitary conditions of such places. The handling of foodstuffs exposed for sale both in the raw and in the cooked state is a condition which urgently needs restriction by proper ordinance. This condition particularly applies to the street fruit and candy stands, cheap eating-houses, and the display of foodstuffs at stores handling a general line of foodstuffs.

The sanitary conditions of our markets and methods of handling foodstuffs therein are in need of much improvement and a suitable ordinance must be formulated to correct and control the conditions existing therein.

TABLE No. XIII—Showing Amount of Work Done by the Food Inspectors by Months During 1914.

Months.	Stores Inspected.	Markets Visited.	Wharves Visited.	Abattoirs Visited.	Slaughter Houses Visited.
January February March April May June July August September October November December	864 1,216 1,359 1,081 785 784 982 1,465 1,162 1,963 1.437 1,381	166 178 226 193 165 159 134 128 134 172 157	546 483 525 525 644 728 695 647 675 756 644 728	48 533 60 555 56 53 53 52 50 61 33 46	268 301 313 306 318 295 296 310 288 335 233 304
Total	14,479	1,984	7,596	620	3,567

# LABORATORY WORK.

Table No. XIV shows the number of examinations made in the Chemical Laboratory during the year. As usual the milk work has largely predominated. The miscellaneous analyses include a variety of foodstuffs and analyses of samples submitted by other departments. The laboratory staff is entirely inadequate to examine many kinds of foodstuffs with any degree of regularity. It is necessary to increase the staff in this laboratory in order to enlarge our field of laboratory work.

TABLE No. XIV—Showing the Number of Milk, Water and Miscellaneous Chemical Analyses Made, 1914.

Months.	Milk Analyses.	Water Analyses.	Miscellaneous Analyses.
January February March April May June July August September October November December	2,336 1,710 2,282 2,034 1,870 2,088 1,157 1,743 1,606 2,028 1,401 1,583	4 0 9 11 6 31 7 25 9 7 5 13	116 71 125 252 172 182 102 64 15 174 275
Total	21,838	127	1,559

#### PROSECUTIONS.

The past year has been an exceedingly active one in so far as the number of prosecutions are concerned. Prosecutions were instituted against 73 persons for violations of our various food ordinances. The following is a summary of these cases:

For selling milk without a permit, guilty	27
For selling milk without a permit, stet	2
For selling milk without a permit, dismissed	6
For selling milk without a permit, dismissed with costs	4
For selling milk containing a preservative, guilty	2
For selling milk containing less than 3.5 per cent. butterfat, guilty.	5
For selling milk containing less than 3.5 per cent. butterfat, dis-	
missed	4
For filling bottles on public highway, guilty	4
For filling bottles on public highway, dismissed	1
For returning unwashed cans to shippers, dismissed	I
For having decomposed fish in possession, guilty	2
For having decomposed fish in possession, dismissed	1
For having unsound meats in possession, dismissed	I
For selling ground meat containing a preservative, guilty	4
For selling ground meat containing a preservative, stet	5
For not displaying trade name or permit number on wagon, guilty	2
For not displaying trade name or permit number on wagon, paroled.	I
_	

All these cases were undertaken after reasonable warning had been given. It is gratifying to note the co-operation of the various police magistrates in thus upholding our food laws.

· Total number of prosecutions.....

# SPECIAL WORK.

During the latter part of the year our Department again undertook the work of handling the annual milk contest of the Maryland State Dairymen's Association. The object of this contest is to stimulate the production of better milk and at the same time, indicates the quality of milk which can be shipped to our city during a given period of time. The contest, as conducted by this Association, differs from those con-

ducted elsewhere in this country in that the duration of the contest is considerably longer, lasting about one month, whereas milk contests elsewhere are based entirely on the shipment of milk on one single day. The average bacterial counts of the twenty-five contestants in 1914 was 40,400 bacteria per cubic centimeter, whereas the average bacterial count of the contestants in 1913 was 182,600, which is a reduction in the average bacterial count of 77 per cent. When one considers the fact that all of this milk was raw milk and simply from the cans after shipment from the farms, it is evident that the milk was of a very high grade. It is further of the greatest interest that 10 of these contestants had average counts under 10,000 bacteria per cubic centimeter, which is the bacterial standard for certified milk.

A special laboratory examination was conducted on the various methods for the determination of required oxygen in water analyses. The results of this investigation will be published separately in one of the scientific journals.

Another special investigation was carried out on the qualitative examination of pasteurized milk to ascertain the types of organisms prevailing in our pasteurized milk, as delivered to the consumer. This work is still being continued and will later be published as a journal article.

During the year a Journal Club was organized, consisting of the scientific staff in the Bureau of Food and Dairy Inspection and the Division of Bacteriology. The members of this Club systematically review the articles appearing in the various scientific journals received by our Department. Over 50 journals, both foreign and domestic, are now received by our Department, in addition to the vast number of municipal, State and government publications, bearing on public health. All of this literature is carefully and periodically reviewed by the members of the Club and abstracts made of such articles as have an important bearing on our work. By this method all the members of the staff are keeping in close touch with

the recent development of the science of public health and our working library is being enriched with a large number of reference cards on the various phases of our health and laboratory work. The interest and spirit manifested already in this work augurs well for the success and permanency of this undertaking.

During the summer months our Department was materially assisted by Mr. B. A. Barlow, who conducted a most careful and painstaking investigation of the milk furnished to hospitals and hotels. This work and other work done by Mr. Barlow was under the auspices of the Women's Civic League of Baltimore. I wish to acknowledge the splendid interest and co-operation displayed by the Women's Civic League of Baltimore in our efforts to improve local milk conditions.

#### RECOMMENDATIONS.

Careful consideration of the foregoing data supplemented by first-hand knowledge of conditions existing in Baltimore compels me to earnestly direct your attention to the following conditions which need control either by means of ordinance or regulation, whenever such regulation is permissible.

First—Our food laws should be amended and revised so as to conform to the State and Federal laws governing foodstuffs.

Second—Our milk ordinance should be amended to require that permits be issue annually and at a nominal charge. This ordinance should also be amended so as to permit the Commissioner of Health to require all farms shipping milk to Baltimore city to have a permit before the product from the farm can be shipped and sold in Baltimore city. Our milk ordinance should also be made to require the pasteurization of all milk, and that all milk should be sold in bottles or other suitable containers, with the exception that bulk milk may be sold under certain special conditions. The pasteurization of milk

should be carefully controlled and defined by ordinance so that the consumer may be reasonably sure of securing properly pasteurized milk.

Third—A suitable ordinance should be drawn and passed, regulating the equipment and sanitary condition of establishments where food is prepared or offered for sale.

Fourth—A bakery ordinance should be drawn prescribing the location, equipment and methods of operation.

Fifth—An ordinance requiring the slaughtering of animals, including poultry, under municipal inspection.

Sixth—Regulations against the exposure of foodstuffs on the street from stands, push-carts, etc., and a more sanitary handling of foodstuffs in our various public markets.

Seventh—An increase in our laboratory and inspection force to meet the needs, as set forth in the above proposed ordinances.

In conclusion, I wish especially to commend the active and untiring work of Messrs. William P. Palmer, Chief Inspector; M. J. Gahan, clerk; R. S. Craig, assistant chemist; H. B. Siegmund, assistant chemist, and Miss A. R. Fisher, stenographer. The writer is indebted also to Mr. J. S. Fulton, Jr., for the preparation of charts and tables in this report.

# Respectfully submitted,

FRED C. BLANCK, PH. D., Chemist and Chief, Bureau of Food and Dairy Inspection.

TABLE NO. XV-Showing the Amount and Kind of Foodstuffs (Except Milk, Which Will Be Found in Table

			_
3	Crabs.		140
	Terrapin.	404	576
	Oysters.	70 2,100 1,516 200 200 200 200 200 200 200 200 200 20	70 7,658
2	Mackerel.		
	Smoked Fish.	8 : : : : : : : : : : : : : : : : : : :	23
2	Salmon.	72	7/1
<b>2</b>	Codfish.	8 : : : : : : : : : : : : : : : : : : :	20
Muk, 1914.	Fish.	217 3,780 5,555 15,055 21,835 11,315 4,810 2,903 519 620	280 66,609
uring	Rabbits.		
Condemned by Months During	Сате.	48	425 3,013½ 3,107½
d by M	Poultry.	795 58 59 385 385 148 128 502	3,0131/2
emme	Beef.	425	425
Cond	Veal.	50	203
Snowing the Amount and Amo of Foodstuffs (Latept Mits, Whith With De Found in Luote No. III) Condemned by Months During 1914.	Meat.	1,004% 105% 723 348 348 81 839 861 450 3,091 27,988 783	517,320 26,250 36,940 <sup>1</sup> / <sub>2</sub>
	Peas and Beans.	26,250	26,250
in financial	Vegetables.	4,363 8,977 8,160 28,290 102,315 71,867 57,395 10,905 22,281 120,512 35,235 47,035	517,320
TABLE INC. AN -JR	Months.	January February March April May June July August October November December	Total

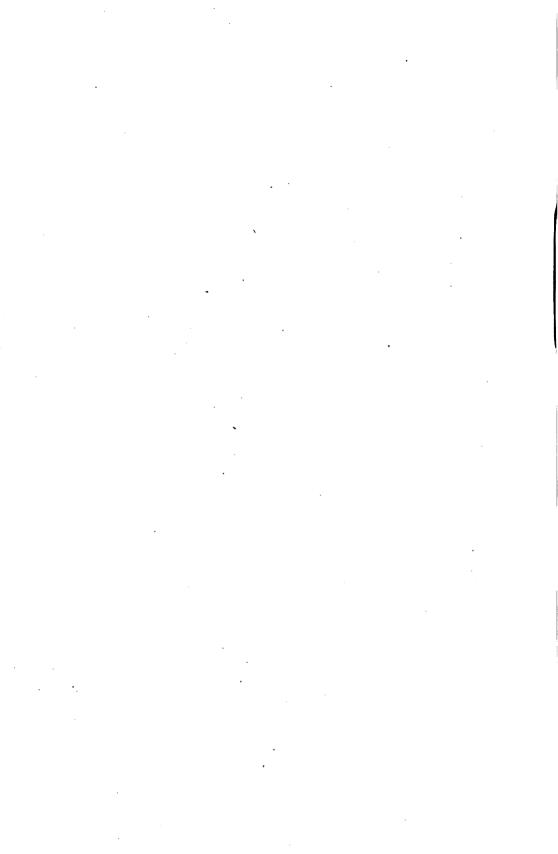
TABLE NO. XV (Continued)-Showing the Amount and Kind of Foodstuffs (Except Milk, Which Will Be Found

	Lard.	71 120%	2031/4
	Corn Starch.		8
	Molasses.	: : : : : : : : : : : : : : : : : : : :	∞
	Syrup.		36
	Condensed Milk.	250	250
4	Canned Goods.	72 72 72 72 7485	8,055
g 191	Pickles.	0 : : : : : : : : : : : : : : : : : : :	8
trin	Sauce.	н : : : : : : : : : : : : : : : : : : :	H
ıs Dı	Mustard.	*	*
in Table No. III) Condemned by Months During 1914.	Sundry Groceries.	13034 1,049 1,955 15,955 15,472 1,061 5,266	155 25,5701/2
	Cantaloupes.	155	
ıdemı	Dried Peaches.	7710 140 1440 236 236 236 236 236 236 236 236 236 236	22
I) Con	Fruit.		67,522
No. II	Malt.	300,000	4 300,000 67,522
able	Canned Beef.	: 4 : : : : : : : : : : :	4
in To	.8 <b>2</b> 8.4	30 2,275 190 2 40 750 24 620 4½ 643 643 643 643	6,843 2,3421/2
	Crab Meat.	30 190 40 750 2,030 620 643 75 1,615 700 150	6,843
	Months.	January February March April May June July August October November December	Total

ound	Pickles.		0
Will Be Found	Tapioca	13½ 2½ 6,000	000'9
hich W	Horseradish.		91
'k' W'	Prunes.	72	72
5t Mil 4.	Ketchup.	15	15
(Excel 1g 191	Saratoga Chips.	12	12
tuffs ( Duri	Вискмћеат.	57	52
Foods	Cream of Wheat.		01
-Showing the Amount and Kind of Foodstuffs (Except in Table No. III) Condemned by Months During 1914	Rasins.	8	8
nd Ki emned	Spices.	4	4
ount a	Oatmeal.	24	72
the Am To. III)	Macaroni.	98	8
ving 1 ble N	Cheese.		74
-Shor in To	Butter.	12 23 2	38
ntinued)	Tuol4	2000	4,840
Table No. XV (Continued)—Shouing the Amount and Kind of Foodstuffs (Except Milk, Which in Table No. III) Condemned by Months During 1914.	MonTHS.	January February March April May June July September October November December	Total

Found	
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sg the Amount and Kind of Food	in Table No III) Condomned by Months
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ABLE No. XV (Contin	

		HEAL	TH DEPARTMENT.	
Found	Hoof.	Total.	8 2 2 2 2 2 2 2 3 3 5 2 4 1 4 5 5 5 5 4 1 4 5 5 5 5 5 5 5 5 5 5	307
vill Be	Animals Condemned on Hoof.	Calves.	νο·ο 4 ν ο 4 4 ω ν ν ο	2
'hich V	ondemn	Hogs.	& H ωω μ ωω H α	73
Iilk, W	mals Co	Sheep.	2211011122	122
rcept A 1914	Aniı	Cattle.	40 4 N W N 4 4 W 4 4	24
unt and Kind of Foodstuffs (Except Condemned by Months During 1914.	Total	Foodstuffs Condemned (Pounds).	14,374¼ 16,779¼ 10,248 34,406 118,163½ 129,753 428,481½ 31,086 33,388 157,086 58,653 57,725¾	1,090,5041/2
of J	le.	Orangea	4 88 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	9
d King mned l		Candy.	200 200 60 60 1,482 12 12 11 167	0/6'1
nount an !) Conde	nery dries.	Confection Gund	279 2321/2	5341/2
the Amo No. III)		Cakes.	705	727
Showing the in Table No.		Bread.	8	300
		Pies.		70
ntinued)	.esilgo	Bakery	1,537	1,537
Table No. XV (Continued)—Showing the Amount and Kind of Foodstuffs (Except Milk, Which Will Be Found in Table No. III) Condemned by Months During 1914.	•	Months.	January February March April May June July August September October November December	Total



# ANNUAL REPORT

OF

# SYDENHAM HOSPITAL

# SYDENHAM HOSPITAL.

# STAFF.

S. T. Nicholson, Jr., M. D
JOHN F. HOGAN, M. D
MISS FRANCES MICHAEL, R. NSuperintendent of Nurses (Resigned March 1, 1914.)
MISS EMMA WILLIAMSSuperintendent of Nurses (Appointed March 1, 1915.)
Assistant Physicians.
JOHN F. HOGAN, M. DJanuary 1 to March 15, 1914
WALTER W. Point, M. D
ALEXANDER J. GILLIS, M. DJune 1, 1914
Consulting Staff.
H. C. Davis, M. D

# Report of Superintendent of Sydenham Hospital.

BALTIMORE, December 31, 1914.

NATHAN R. GORTER, M. D., Commissioner of Health.

DEAR SIR:

I have the honor to submit herewith the report of Sydenham Hospital for the year 1914. You will note that the number of admissions did not reach the number of the previous year. This was due mostly to the fact that in the early part of the year we had an outbreak of diphtheria among the nurses, and it was impossible for us at that time to obtain nurses to substitute for the ill members of our staff. During the latter part of the year we were compelled to refuse many cases of scarlet fever, due to an insufficient amount of floor space. The wards were so overcrowded that it was impossible at this time to accommodate more patients.

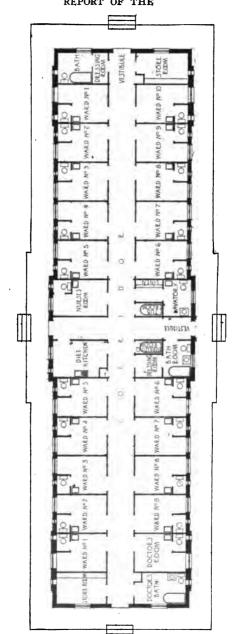
You will also note that the daily cost per patient was more than in the year 1913, which I believe was due to the increased cost of living.

I take this opportunity to express my gratitude to you for the invaluable help you have given me.

Yours respectfully,

JOHN F. HOGAN, M. D., Superintendent and Resident Physician.

# SYDENHAM MUNICIPAL HOSPITAL WARD B



PLAN

# REPORT OF SUPERINTENDENT.

During 1914 many changes were effected in the buildings and numerous needed improvements made on the grounds.

- In the month of March the offices were moved from the Administration Building, which is now known as the Nurses' Home, to the building which was erected for the residence of the Superintendent.

The new residence for the Superintendent was completed in December, 1913, and was occupied on March 15, 1914. This building is used as living quarters for the Superintendent and the Assistant Physician, and a part of it is set aside for the offices of the institution.

The new observation ward was started in May, 1914, and is now completed, except for inside painting, furnishings and equipment, and therefore has not been turned over to the Health Department. This is a unique building, being one story in height, containing 20 rooms available for patients, two storerooms, a linen-room, office for head nurse, four bathrooms; two closets for portable tubs, one of which is for the sterilization of tub. Underneath the building there is a pit 16 feet by 18 feet by 6 feet 10 inches, which contains a boiler for hot water supply, switchbox for lighting purposes and regulating devices for the heating system.

Each one of the 20 rooms or wards is a complete unit, and is equipped with its own toilet and slop sink, so that all patients will be completely isolated from one another. Each room has an outside entrance through which the patient will be admitted, and an entrance from the hall for the use of doctors, nurses and attendants. It is difficult for me to express in writing the

wonderful aid this building will be to us in the future, and I hope that it will soon be utilized.

Some of the improvements and repairs, plus the current running repairs made during the year, are as follows:

About 16,000 cubic feet of grading.

One thousand and fifty-eight square feet of cement walks laid.

Lawn grass seed to cover about 14,570 square feet.

One hundred and eighty linear feet of cement curbing, with gutter, laid.

# SUPERINTENDENT'S RESIDENCE.

The dining-room of this building has been converted into an office, with the furnishings taken from office formerly in the Administration Building.

Two bedrooms on second floor and living-room on first floor were partly furnished from the expense account.

Four cellar windows reconstructed with cement and dished to the center and connected with terra-cotta drains, thereby necessitating the laying of 100 feet of 4-inch terra-cotta pipe.

Telephone system was changed so that the switchboard is now located in the office. An additional single extension telephone was run to the upper floor of the building.

Shades and screens were purchased for doors and windows of entire building, and awnings were hung on the office windows.

A boiler was installed in the cellar for obtaining hot water.

# Nurses' Home.

Two rooms were fitted up on the lower floor—one as a library and the other as a living-room.

A new large radiator was placed in the living-room.

Small radiator in the bathroom was replaced by larger one. Floors of four of the rooms were stained.

Various necessary furnishings were supplied in living and sleeping rooms.

A cupboard for groceries and provisions was built in the cellar.

# HOSPITAL.

Irrigation tables constructed in two of the wards.

New window screens to replace worn ones.

New instruments, including auroscopes, intubation set, blood pressure apparatus, etc.

Detailed Medical Report. 1914.

	Rer Jan.	Remaining Jan. 1, 1914	ng 14	PΑ	Admitted.	ਚ	Д	Discharged.	rged.		Remaining Jan. 1, 1915.	naini 1, 19	ng 15.
Diseases.	Male.	Female.	Total.	Male.	Female.	Total.	Recovered.	Not Recov'd.	Died.	Total.	Male.	Female.	Total.
Scarlet fever Scarlet fever Scarletinal nephritis Scarletinal nephritis Arthritis Sublingual adenitis Sublingual adenitis Sublingual adenitis Mumps Lobar pneumonia, whooping cough, acute nephritis, Endocarditis media Endocarditis Couble otitis media, cervical adenitis Otitis media, suppurative arthritis Single otitis media Single otitis media Sum of leg Acute nephritis, cancrum oris Chronic nephritis	н (и ) і і і і і і і і і і і і і і і і і і		н і д і і і і і і і і і і і і і і і і і	4 4 4 н н н н н н и н н н и	8 HH : : : : H : 0 : INH : H 0	<u> хниянн</u> наненти	8нин: н нннни: нн		а н н н н н н	9 н н н н н н е н е н е н е е е е е е е	м н н н н н н н н н н н н н н н н н н н	и :: н : : : : : : : : : : : : : : : : :	2

Single otitis media, cervical adenitis   I   I   2     I   I   3       3	_	2	<u>:</u>	-	H	8	-	-	8	_:	<u>:</u>	<u>:</u>	
Acute nephritis	<u>:</u> ::	<u>:</u> :	:	н	H	:	:	<u> </u>		:	н		_
Infection of leg.	<u>:</u> :	<u>:</u> :	-	:	H	_	:	:	ı	:		:	
Bronchitis	<u>:</u> ::	<u>:</u> :	-	:	н	H	:	:	н	:		<u>:</u>	ä
Otitis media, rhinitis	<u>:</u> ::	<u>:</u> -:	н	:	-	н		:	Н	:		<u>:</u>	٠.
Double otitis media, acute nephritis			:	<del>-</del> :	:	н	-	:	н	: :		:	
Abscess of right tonsil	-	н :	:	:	:	н	:	:	н	:	: : : : : : : : : : : : : : : : : : : :	:	
Diphtheria, double otitis media	I	-		:	:	-	:	:	H	:	: : : : : : : : : : : : : : : : : : : :	:	
Admitted to nurse scarlet fever infant	<u>:</u> :	<u>:</u> 	:		н	H	:	<u> </u>	н	<u>:</u>	<u>:</u> :	<u>:</u>	
Total	<u>                                     </u>	6	<u> </u>	   :	8	<u>                                     </u>		∞	8		<u>                                     </u>	<u> </u>	10

Detailed Medical Report, 1914—Continued.

ing 915.	Total.	3
main I, I	Female.	
Remaining Jan. 1, 1915.	Male.	4 : : : : : : : : : : : : : : : : : : :
-t-j	Total.	27 1 1 1 1 1 1 1 7 1 4 1 1
Discharged.	Died.	нн к
Disch	Not Recov'd.	
	Recovered.	25 :: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ted.	Total.	2 H H H H H H 7 L E H H
Admitted.	Female.	32
<b>V</b>	Male.	8 1 1 1 1 4 1 4 1 4 1 1
ing 914.	Total.	7
Remaining Jan. 1, 1914.	Female.	и
Re	Male.	9 : : : : : : : : : : : : : : : : : : :
	Diseases.	Diphtheria: Pharyngeal Pharyngeal, broncho-pneumonia Pharyngeal, diphtheritic paralysis. Pharyngeal, diphtheritic paralysis. Pharyngeal, chronic nephritis Pharyngeal, scarlet fever. Pharyngeal, scarlet fever, single otitis media. Pharyngeal, miscarriage Laryngeal, cervical adentits, otitis media. Laryngeal, broncho-pneumonia Laryngeal, whooping cough. Nasal

#### LAUNDRY.

Four pieces of laundry machinery installed, consisting of a washer, extractor, mangle and dryroom, during the month of May. The washer and extractor were placed in the basement, mangle and dryroom on the first floor.

Plastered walls and ceiling on first floor were replaced with metal and 3½-foot tongue-and-groove wainscoting.

One window in mangle-room constructed.

A hoist elevator connecting the first floor with the basement.

A steam coil, 10 feet long, in mangle-room.

Entire reconstruction of steam pipes in cellar.

Stormhouse and clothes chute over entrance to cellar. .

#### GARAGE.

Box stall torn down.

New radiator installed in compartment of building which was formerly used for a stable.

Bench, to feet by 4 feet, in ambulance room.

Blanket locker in ambulance room.

#### UPPER FLOOR.

New window in loft.

Room for male employes thoroughly renovated and painted. For the year 1915 the following are needed:

First (Nurses' Home)—Present Nurses' Home contains but four small sleeping-rooms. Two nurses are forced to occupy one of these rooms, which are entirely inadequate for two individuals. One nurse occupies each of the other rooms. It is very obvious that with the opening of the new observation ward that this building will be insufficient as a dwelling place for the additional nurses needed. It is, therefore, very urgent that more commodius quarters for the nurses be obtained.

Second (Detention Ward)—This building will need to be completely furnished, screened and equipped for the purpose. An extension telephone will have to be installed here.

Third (Ambulance)—This is in such a run-down condition that a new one will be needed at the beginning of next year. It will be advisable to have a metal body, so that the interior may be cleansed by washing and the use of antiseptic sprays, which a wooden body would not stand.

Fourth—As many colored patients are refused each year, a building for this race should be erected.

Fifth (Morgue and Chapel)—There is no place here at present for relatives to view the bodies, or for religious services.

Sixth—Lining the interior of garage with metal so as to make it as nearly fireproof as possible.

Seventh-Incinerator and fumigation plant.

Among miscellaneous improvements the following are necessary:

Running water for four rooms in Ward "A."

In sun parlor of Ward "A" (scarlet fever side) concrete floor, radiators and screens.

In the rear of diphtheria ward, the porch should be glassed in and screened.

Awnings for the dining-room of the Nurses' Home.

Repair of steps leading to kitchen.

Extra fire plug with 200 feet of hose.

Screens for porches of Nurses' Home and Superintendent's residence, as it is impossible to sit out of doors in the evening on account of mosquitoes.

Workshop for general repairs.

Laying of cement walks and building of cinder or macademized road around Ward "B."

Top dressing for Twenty-sixth street (road which leads from hospital to car line), from Pratt street (proposed) to Eastern avenue.

In conclusion, I wish to extend my sincere thanks to my assistants, the nursing staff and employes, for their faithful performance of duty at all times.

John F. Hogan, M. D., Superintendent.

# DETAILED STATEMENT OF OPERATING EXPENSES.

# Administration.

Şalaries	\$3,500 00	
Stationery, postage and printing	70 55	
Car fare, telephone and telegraph	55 45	
Miscellaneous	19 16	
Library	58 62	
Total administration		\$3,703 78
Professional Care of Patient	ts.	•
Salaries	\$2,793 40	
Expenses:		
Apparatus and instruments	93 63	
Medical and surgical supplies	360 <b>0</b> 3	
Pharmacy	118 98	
Supplies (other than medical or surgical)	483 97	
Equipment for nurses	60 35	
Special nurses	446 85	
Total professional care of patients		4.357 21
Department Expenses.		
Salaries	\$2.480.00	
Expenses:	φ2,400 00	
Dairy, eggs and ice\$1,483 or		
Provisions		
Meats		
Fruits and vegetables 657 77		
Truits and vegetables		
Total steward's department	4,698 85	
Ambulance, delivery car, garage \$1,183 43		
Capital expenditures (Ford delivery		
car) 919 95 Kitchen 38 50		
Laundry 602 96	•	
Housekeeping 184 02	0 06	
	2,928 86	
Total department expenses		10,107 71
	_	
Amount carried forward		\$18,168 70

Amount brought forward	\$18,168 70
General House and Property.	
Salaries	
Heat and light	
Maintenance (machinery, piping) 309 23	
Maintenance (real estate and building) 1,136 38	
Capital expenditures (grading, furniture, etc.) 1,142 60	
	3,675 04
Capital expense (rent, laundry machinery)	2,077 50
Total operating expenses for the year	\$23,921 24
_	
·	
Chamberson of Company Barrier Danie	
STATEMENT OF CURRENT REVENUE, DECEMBER 31, 191 DECEMBER 31, 1914.	3, 10
Private room patients	\$200 20
Pay ward patients	299 01
Immigrant patients	226 00
Ambulance fees	9 00
Sale of horse, etc	165 40
Total	\$899 61
Total salary appropriation for 1914	\$10.160 00
Total appropriation for expenses for 1914	
Total.	\$24,310 00
Returned to the City Comptroller from salary appropria-	
tion	\$327 02
Returned to the City Comptroller from appropriation for	•
expenses	61 <i>7</i> 4
Total operating expenses	23,921 24
Total	\$24,310 00

# GENERAL STATISTICS.

Patients in hospital at beginning of year	18
Patients in hospital at end of year	27
Maximum number of patients in hospital at one time	30
Minimum number of patients in hospital at one time	2
Daily average number of patients	14.73
Average number of days' stay of patients:	
Scarlet fever	33.72
Diphtheria	
	18.65
Scarlet fever and diphtheria	41
Scarlet fever suspect	9.50
Diphtheria suspect	7
Total number of days' treatment given patients	5,376
Average daily cost per patient	\$4.542
Average daily cost per patient, minus improvements to the	
hospital that are permanent	\$3.338
Total number of days' board given patients and employes	11,764
Total number of deaths	14
Total number of admissions	213
Death rate from scarlet fever (per cent.)	71/2
Death rate from diphtheria (per cent.)	5 13/1
- 19 · · · · · · · · · · · · · · · · · ·	5 /u
Death rate from diphtheria, deducting deaths within 24 hours	15 /
(per cent.)	4 15/1
Average cost of subsistence per person per day	\$0.399

Number of Days Maintenance of all Persons by Months.

Months.	Patients.	Employes.	Total.
January	508	511	1,019
February	513	502	1,015
March	543	556	1,099
April	418	540	958
May		547	937
June		534	853
July		558	960
August		527	997
September	225	465	690
October	359	550	909
November		540	931
December	838	558	1,396
Total	5,376	6,388	11,764
Daily average	14.72	17.50	32.23

# Admissions by Months.

Diseases.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Scarlet fever Diphtheria Scarlet fever and diphtheria. Suspects Admitted to nurse scarlet fever patient Admitted account exposure to diphtheria Diphtheria carrier	• • •			8 4  1	8 6 	2 5 2 1	10 1 	10 5 	3 5	3 9  1	7 ·16 ··· ··· I	19 15 	107 97 2 3 1
Total	21	24	23	14	14	II	11	16	8	13	24	34	213

# Cases Refused Admission.

Diseases.	White.	Colored.	Total.
Scarlet fever. Diphtheria. Scarlet fever suspect. Measles. Chickenpox Erysipelas. Whooping cough.	32 21 3 5 2 6	4 2	36 23 3 5 2 6
Total	71	6	77

#### REPORT OF RESIDENT PHYSICIAN.

During the year 1914 five cross-infections occurred, but I am pleased to report that in not one instance was the disease communicated to other patients.

First—A male child, nine years old, was admitted from his home on February 9, suffering with scarlet fever, and developed mumps on February 12.

Second—A female child was admitted from one of the North German Lloyd steamships on February 20, suffering with diphtheria, and developed measles on March 2. On questioning the ship's physician as to whether or not there were other infectious diseases on board, he made a positive reply, but stated that this child had been in a separate part of the ship.

Third—A male child was admitted from his home on March 14, suffering with scarletinal nephritis, and developed chicken-pox on March 17.

Fourth—A male child was admitted from one of the dispensaries on May 29, suffering with laryngeal diphtheria, and on June 5 developed whooping cough.

Fifth—A male child was admitted from his home on July 18, suffering with scarlet fever, and developed whooping cough 15 days later.

I might add here that not one case of mastoiditis developed during the year, nor were there any intracranial complications. For the other complications I refer you to the tabulated medical report.

The mortality rate in scarlet fever was .0747, while that of diphtheria was .0594, including one death within 24 hours.

We are greatly indebted to the consulting surgeon, Dr. Arthur M. Shipley, and to the consulting otologist, Dr. H. C. Davis, for their numerous visits and prompt response, also to Dr. A. J. Gillis, the assistant physician, whose aid has been very valuable.

John F. Hogan, M. D., Resident Physician.

#### GENERAL STATISTICS.

Patients in hospital at beginning of year	17
Patients in hospital at end of year	27
Maximum number of patients in hospital at one time	30
Minimum number of patients in hospital at one time	
Daily average number of patients	14.73
Average number of days' stay of patients:	
*Scarlet fever	33.72
†Diphtheria•	18.65
‡Scarlet fever and diphtheria	41
Scarlet fever suspect (two patients)	9.50
Diphtheria suspect (one patient)	7
Total number of days' maintenance given patients	5,376
Average daily cost per patient	\$4.542
Average daily cost per patient, minus improvements to hospital	
that are permanent	\$3.338
Total number of days' board given patients and employes	11,764
Total number of deaths	14
Total number of admissions	213
Death rate from scarlet fever (per cent.)	71/2
Death rate from diphtheria (per cent.)	5 15/3
Death rate from diphtheria, deducting death within 24 hours	
(per cent.)	4 18/1
Average cost of subsistence per person per day	\$0.399

†There were eight cases of diphtheria in the hospital on January 1, 1914, having been left over from 1913. Ninety-eight cases were admitted, one of which was not treated, leaving the total admission number of diphtheria patients 97, and of these seven were left in the house after December 31, 1914, leaving 98 to be reckoned on.

†There were two patients admitted during the year suffering with both scarlet fever and diphtheria. One patient was left over from 1913, who also suffered with both diseases.

<sup>\*</sup>There were eight cases of scarlet fever in the hospital at the beginning of 1914, having been left over from 1913. One hundred and eight cases were admitted during 1914, one of which received no treatment, leaving the total admitted 107, and of these 19 remained in the house after December 31, 1914, leaving 96 to be reckoned on.

# ANNUAL REPORT

OF THE

# TUBERCULOSIS NURSES DIVISION

. . 

# Report of the Tuberculosis Nurses Division.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

DEAR SIR:

December 31, 1914, ended the fifth year's work of the Tuberculosis Nurses Division of the Health Department. The staff greatly regrets that the nurse who organized and brought it to a state of great efficiency, Miss Ellen N. La Motte, has resigned. Her going is a loss to the Department and it was with a mingled sense of honor and responsibility that I accepted her position. The work made wonderful strides during her regime and attained at least a continent-wide reputation.

Besides the superintendent there are on the staff sixteen other registered graduate nurses as field workers and one as clerk for the dispensaries. The nurses in the districts are supposed to be on duty eight hours a day. They have a half day off in the middle of each week, two weeks sick leave and two weeks vacation yearly, all Sundays and other legal holidays. They wear blue chambray uniforms in summer and blue denim ones in winter made into plain shirt waists and skirts with a watch-pocket on the waists and one or two large pockets on the skirts. Hats and coats may be chosen according to individual taste. The supply bags are the well-known Boston ones. Each nurse wears the pin provided by the city for all employes designating their occupation.

The nurses report to the superintendent in the main office in the Health Department every morning. This with clerical

work and stocking their bags requires about an hour. The same amount of time is spent in the branch offices at noon for lunch, re-stocking the bags, and receiving patients. Another half hour or hour is consumed in their homes at night by more clerical work and 'phoning.

There are eight branch offices located on the border lines of the districts so that all but two are used by more than one nurse—two of them by three. As some of the districts are very large much time is necessarily lost in traveling back and forth. Each nurse should have an office in the center of her own district, not only to avoid this waste but also for the convenience of those patients who needing supplies more frequently than the nurse can deliver them with her present amount of work could send someone a reasonable distance for them.

The nurses visit all people reported to the Health Department as positive cases of pulmonary tuberculosis except those who are private patients of a physician who for a reason, good or bad, refuses the nurses admission and also those who are reported as only showing symptoms that may be due to this disease. In the latter case they ask the family physician for a diagnosis, if there is no physician they try to persuade the people to be examined as soon as possible at some tuberculosis dispensary or to have a specimen of their sputum analyzed at the Health Department Laboratory. When there is tuberculosis the nurses give any nursing care required, advise the family in regard to diet, exercise, sleeping accommodations, and other habits of life, distribute prophylactic supplies and instruct in their use, and render assistance in the formation of plans for the patients' admission to sanatoria. They arrange for the fumigation of houses after the removal of tuberculous patients and for the destruction or sterilization of bedding, draperies, carpets, clothing, etc., and visit afterward to learn whether these things have been attended to satisfactorily. They try to get full or part time employment for those who have had to give up their usual form of occupation because of illness. Their clerical work consists in keeping accurate, tho not detailed, records of visits paid and of the condition, surroundings, and treatment of all their patients, so that at any time a study can be made of the development of tuberculosis work in Baltimore or of the efficiency of the Division.

#### PATIENTS.

During the year the visiting list has enlarged, as is shown in the following table:

6 1.00	
Number of patients under supervision January 1, 1914  Old patients returned to visiting list	3,400 88
New patients during year	1,704
Total	5,192
Number of patients died during year 838	
Number that left city	
Lost (moved, address unknown)	
Not tuberculous	
	T 525
	1,535
Total	3,657
Uncounted thru error in index	
Patients 'under supervision December 31, 1914	3,729
As a result the average number of patients per nurse is	now
233 instead of 2121/2 as it was a year ago.	
We have registered 1,505 patients with the State Boa	-4 ~6
	iu oi
Health as positive cases of pulmonary tuberculosis.	
Original manistrations	0-6
Original registrations	856
Duplicate registrations	649
M-4-1	
Total	1.505

As the total number of original registrations for the City of Baltimore at the State Board for this time has been 2,145, we reported 39.91 per cent.

To these 5,192 patients or in their behalf we have paid the following visits—an increase of 3,427 over last year:

Visits to patients	72,301
Co-operative visits	4,059
Visits to arrange for fumigation	3,303
Visits to inspect after fumigation	3,063
-	
Total	82 726

This does not mean that we are doing better work, but that we are reaching more people and consequently giving less care to each one. No nurse can properly care for more than 100 patients but at present each is attempting to care for 2½ times that number. Last year the average length of time allowed from the beginning of one visit to the beginning of the next was only 14½ minutes and I have not had the courage to learn what it has been this year.

#### PROPHYLACTIC SUPPLIES.

During the year we have received from the State Board of Health for distribution among our patients the following supplies:

	No.	Cost.
Paper napkins	670,000	\$368 50
Fillers	97,900	432 65
Bottles of disinfectant	8,512	851 20
Tin cups	1,128	<i>7</i> 8 <i>9</i> 6
Total		\$1.721.21

As there were enough books of information for new patients and oiled muslin pockets left over from last year it has not been necessary to order any.

We have frequently been accused of extravagance in the use of these supplies. The State Board in each prophylactic package gives:

- 100 Napkins.
- 100 Fillers.
  - I Tin cup.
  - I Bottle of disinfectant.
  - 2 Pockets.
  - I Book of information.

This amount is supposed to last 3 months. The book of information urges the patient to cover the mouth with a paper napkin when coughing and to use a fresh one every time. Consequently the number given for 3 months limits the number of coughs to about 1 a day. A person with copious expectoration is allowed 1 filler per day for the sputum cup and one with no expectoration the same number. We give far more liberally to our open cases and not at all to those who do not need any. There is no doubt in my mind that some supplies are wasted but the proportion is probably very small indeed.

Half the cases registered with the State Board of Health live in Baltimore. The total amount of money expended by them for supplies for the whole State in 1914 was \$4,736.07, of which \$1,731.31 was for the city patients under our care (36½ per cent. of the total amount for 50 per cent. of the patients), rather good economy.

#### Social Condition.

White native Americans	2,357
Jews (native and foreign born)	521
Foreigners (other than Jews)	370
Negroes	481
Total	3,729

Only 99 or 2½ per cent. of the cases reported object to being visited by the nurses—less than last year. Of the 1,704

new patients, 286 or 17 per cent. were reported as private patients by general practitioners.

#### PHYSICAL CONDITION.

Positive cases	3,181
Acute	
Incipient 251	
Moderately advanced 1,460	
Advanced 655	
Chronic	
Arrested (have not shown symptoms for) 535	
2 years 397	
3 years 79	
4 years 19	
More than 4 years 40	
Suspicious cases	548
Patients in institutions	468
Patients at home	
Able to work	•
Able to work part time 714	
Unable to work but not confined to bed 462	
Confined to bed	
Active cases	2,646
Adequately careful 565	• •
Moderately careful	
Careless 670	

Besides those in institutions there are only 97 patients, actively tuberculous and at home, who can be considered adequately careful and all of them are very early cases in which the danger to others is negligible. All those confined to bed should undoubtedly be in hospitals for advanced cases, those unable to work but not confined to bed should be in sanatoria, and those able to work part time would be far happier at some place, such as a farm or industrial colony, where this kind of employment could be given and their physical condition watched.

#### CHARITABLE RELIEF.

Only 803 or 21 per cent. of all our patients have ever been known to a relief giving organization. This is an increase of 3 per cent. over last year or one-sixth as many more people—a sad commentary on the hard times that have been upon us.

#### PATIENTS KNOWN TO CHARITABLE ORGANIZATIONS

PATIENTS KNOWN TO CHARITABLE ORGANIZATIONS.	
To I organization	759
To 2 organizations	39
To 3 organizations	4
To 4 organizations	1
Total	803
Known to:	
Federated Charities	621
Hebrew Benevolent Society	127
St. Vincent de Paul Society	83
I other	20
2 others	2
Unemployment has affected us too. At present 45 of	our

Unemployment has affected us too. At present 45 of our patients who are able to work cannot obtain any—thus lessening the income upon which not only they but 114 members of their families depend. 411 members of other families in which we have patients are in a similar condition thus changing the economic position of themselves, 136 of our patients, and 83 other members of their families. Smaller incomes mean less food of poorer quality, less adequate housing conditions, and worry—three splendid aids in spreading the tuberculosis already in their midst.

#### DIET.

We have asked for diet in only 34 cases. It has been provided as follows:

Federated Charities	29
Hebrew Federated Charities	3
St. Vincent de Paul Society	2

The di	et consists	of one	quart	of	milk	а	day	and	is	given
only und	er four co	nditions	:							

•	
Awaiting diagnosis	5 12 16 1
It is a curious fact that again we have asked for this all entirely for white people altho about 1/1 of all our patients colored.	
White	32 2
Sources.	
Found by nurses	157
Reported by physicians	286
Patients, family, or friends	71
Instructive Visiting Nurses Association	50
State Board of Health	168
Municipal Tuberculosis Hospital, city office	27
Eudowood	10
State Sanatorium	156
Jewish Home for Consumptives	14
Federated Charities	59
Hebrew Federated Charities	3
Mercy Hospital	I
Johns Hopkins Hospital	- 4
Harriet Lane Dispensary	5
Phipps Tuberculosis Dispensary	439
Maryland University Tuberculosis Dispensary	39
Health Department Tuberculosis Dispensaries	133
City Medical Agencies	12
Baltimore General Dispensary	2
Miscellaneous	<b>5</b> 9
——————————————————————————————————————	

Tho there were only 5 cases reported by hospitals added to our visiting list this year the following tables show the large number actually found in these institutions. Permission to visit all those reported by hospitals has always been granted but some of the patients are not residents of Baltimore and others die before they can be removed to their homes.

#### Pulmonary tuberculosis reported by:

St. Joseph's Hospital	7
University of Maryland Hospital	10
Marine Hospital	II
Johns Hopkins Hospital	15
Maryland General Hospital	3
Mercy Hospital	3
Total	49
Deaths from pulmonary tuberculosis in:	
Mercy Hospital	15
St. Joseph's Hospital	7
Hebrew Hospital	4
Garrett Hospital	5
Maryland General Hospital	.6
University Hospital	5
Maryland Homeopathic Hospital	I
United States Marine Hospital	8
Johns Hopkins Hospital	22
Eye, Ear, Nose and Throat Hospital	2
Union Protestant Infirmary	3
Skin and Cancer Hospital	I
Biedler-Sellman Sanatorium	I
Franklin Square Hospital	I
	81

These tables indicate that even at present general hospitals care for people not only suffering from pulmonary tuberculosis but sufficiently ill to die from it within a very short space of time.

#### DISPENSARIES.

The dispensaries report by far the largest number of cases—about 35 per cent.

Health Department Tuberculosis Dispensaries	133
Phipps Tuberculosis Dispensary	439
Harriet Lane Dispensary	5
Maryland University Tuberculosis Dispensary	39
City Medical Agencies	12
Baltimore General Dispensary	2
<del></del>	<del></del>
Total	630

Our nurses are on duty at all of the tuberculosis ones. This enables us not only to get reports of tuberculosis promptly but at the same time to secure instructions from the physicians making the examinations and to give them the benefit of all our knowledge of home and family conditions. We have found also that patients make the first and subsequent visits more readily if they know that the nurse who visits them will be at the dispensary.

Health Department Tuberculosis Dispensaries:	New Patients.	Return Visits.
602 South Bond Street	381	<sup>′</sup> 570
1418 Light Street	212	422
1220 McCulloh Street	196	141
-	*******	
Total	789	1,133
Phipps Dispensary	1,341	6,859
University Tuberculosis Dispensary	600	301

We have sent 2,785 patients to the dispensaries this year. For some time it has been more and more apparent that there is great need for a tuberculosis dispensary somewhere in North Baltimore convenient to the alleys in the vicinity of North avenue and Charles street thickly populated by negroes and easily reached by those living in the mill district of Hampden-Woodberry and the newer sections of Waverly where so

many ex-sanatorium patients are moving because the houses have porches and fairly large yards. The nearest tuberculosis dispensaries are Phipps, at Monument and Wolfe streets, and the Municipal, at 1220 McCulloh street, both several miles away and necessitating a long ride on two car lines. belief in the need for a dispensary became so strong that in October many people and organizations interested in all sections of North Baltimore, representing the Maryland Association for the Prevention and Relief of Tuberculosis, the Federated Charities, the St. Vincent de Paul Society (especially the conference belonging to the parish of Sts. Philip and James), the Children's Playground Association, the Instructive Visiting Nurses Association, the West Park Recreation Centre, churches in the neighborhood, and individual taxpayers who desired the same protection for their part of the city that had been so freely given to others, appealed to the Health Department to open a fourth dispensary and to locate it there. As this was not possible because the Budget for 1915 had been sent to the Board of Estimates, they then presented their request to this body. We were asked to show by our map and data the necessity for this dispensary that we had found in our work. The Board seemed greatly interested but unfortunately at the last minute it was found impossible to make the appropriation. Their interest, however, has given us courage to hope that next year this dispensary will become a reality.

#### INSTITUTIONAL CARE

During the year we have sent 851 patients to sanatoria:

Municipal Tuberculosis Hospital	286
State Sanatorium	365
Eudowood Sanatorium	105
Jewish Home for Consumptives	94
Other sanatoria	I
Total	8er

The other sanatorium was one at White Haven, Pennsylvania, and the patient was a colored boy able to pay for treatment and therefore refused admission to our Municipal Tuberculosis Hospital as he was not a pauper.

The care and treatment at the Municipal Tuberculosis Hospital is very good and many patients, white and black, who would be perfectly willing to go to an institution so near home and greatly benefited by doing so, cannot be admitted or will not apply for admission because of the fact that under present conditions one must be declared a pauper.

People who are not paupers are frequently unable to pay for medical care, particularly is this true when the patient is the breadwinner of the family; and if the disease is other than pulmonary tuberculosis or the contagious diseases of childhood they can get treatment free in any city hospital without being branded in this way.

1605 or 43 per cent. of all our patients have had sanatorium care—1,514 were white and 91 colored. Thus while 46 per cent. of all our white patients have been able to receive such treatment it has been possible for only 19 per cent. of our colored ones. Of the white ones there have been in:

I Sanatorium	
2 Sanatoria	289
3 Sanatoria	27
More than 3	4
•	
Total	1,514

All of the colored have been to only one.

#### CHILDREN.

We have 286 children under 15 years of age on our list. For these children we have only 25 beds at the State Sanatorium and consequently their stay must be limited to six

months with no re-admission. There are no accommodations for colored children.

White native Americans	196
Jews	33
Negroes	5 <i>7</i>
Total	286

It is almost impossible to get a diagnosis of pulmonary tuberculosis in children until they are so ill that the chances for improvement are very slight indeed. As all tuberculosis experts tell us that this is the period in life when the danger of infection is greatest it would seem wise to treat all children as possible cases of tuberculosis. This could be done only by beginning where the infant mortality nurses leave off, at three years of age, and following all children until they reach the age of puberty. Combined with this supervision should be a strenuous campaign to make all schoolrooms fresh air ones to prevent children from becoming sick instead of, as at present, providing such rooms only for children who have already fallen victims to the bad ventilation and dirt of the ordinary classroom.

#### Fresh Air Schools.

At present Baltimore has only one fresh air classroom located in a school at Locust Point and accommodating but 25 pupils. The fact that these children have gained 679 sessions over the record of last year shows strikingly the improvement in health that being out of doors has meant to them. The improvement is even more vividly brought out when we realize that this gain is an increase of 205% per cent. or one-fifth of the total number of sessions they were able to be present during that entire year.

All of the children tho physically below par gained a grade, two more than one, except those who were either mentally deficient or lacked foundation thru poor attendance due to sickness or by being too ill while in school to take advantage of the instructions given. This school was made possible only because the faculty, especially the principal, believed not only that a fresh air room was needed and would be of great benefit, but believed it sufficiently to persuade private individuals and organizations to provide the necessary funds and to give many hours of their precious free time over a long period to make it a success. It is a striking example of what can be done against apparently insurmountable difficulties by those who have sufficient confidence in a cause and are willing to give freely of their time and talent to bring about its accomplishment. We hope during the coming year to have two more such rooms.

Even more important than this classroom in the campaign to prevent the development of tuberculosis in our well children (instead of waiting until they are sick to cure them) is another undertaking in the same school. It might probably be called the "Baltimore Idea," as it seems not only to be pioneer here but to be untried in any other locality. We are indebted to Miss Persis Miller, the principal of the school, for originating it and putting it into execution. The 100 children in the primary grades were divided during the first two terms into four groups—each group spending one-fourth of the school day in the classroom and the other three-fourths in the adjacent park under the guidance of a playground instructor. Here they had supervised play to develop their bodies, were told stories, and dramatized them. In spite of the fact that they spent only 1/4 as much time in actual class work, all of the children made more progress than they had last year and the brightest made 41/3 as much. This was due to some extent to the individual attention which they received in the small sections but primarily to the fact that with plenty of fresh air and exercise they were physically strong and alert' enough to make study easy. During the last term they were divided into two sections, spending half the day out of doors.

If this "Baltimore Idea" were widespread thruout the city and country, I wonder what the result would be in developing children with sufficiently strong bodies to withstand tuberculous and other infections. Judging by the scholastic results of the experimental year, the cost to the School Board would be greatly lessened by the progress made.

#### FUMIGATIONS AND NUISANCES.

		Not
	No.	Necessary.
Investigations for fumigation after death	1,110	48
Investigations for fumigation after removal:		
To Municipal Tuberculosis Hospital 383		51
To State Sanatorium 573		34
To Eudowood Sanatorium 143		6
To Jewish Home for Consumptives 83	•	3
To other quarters		r
<del></del>	2,264	<b></b> 95
•		
Total	3,374	143

Fumigations are not necessary for several reasons—other cases of tuberculosis in family, an early return of the patient to the same quarters which will not be used in the meantime, when the place of residence proves to be a shed, stable, or wagon, or a lodging-house made up of dormitories which cannot be fumigated (in such instances the owner or proprietor is required to clean thoroly and have bedding, if any, sterilized or destroyed), or when the address is fictitious and no place of residence can be found.

The following results were obtained thru the nurses' instructions to the families during the visits before and after fumigation.

#### After death:

Houses cleaned	847
Houses not cleaned	110
Houses vacant	71
Tetal number inspected	

Bedding, etc., burned Bedding, etc., sterilized	336 383
Rooms papered, etc	54
After removal:	
Houses cleaned	1,659
Houses not cleaned	174
Houses vacant	231
Total number inspected	2,064
Bedding, etc., burned	202
Bedding, etc., sterilized	235
Rooms papered, etc	102
We have reported to missinger	

We have reported 74 nuisances.

#### SPECIAL INVESTIGATIONS.

Two years ago the nurses of this Department, at the request of a large printing firm, visited all its employes and had them examined to find if possible the source of infection of several cases of tuberculosis that had developed in their midst. Contrary to the belief held by eminent tuberculosis workers that such investigations result in the unreasonable, wholesale discharge of tuberculous employes and the refusal to reinstate them when in good condition, the employer during this year inquired from us whether it would be proper to re-employ one of the men who had gone away for treatment at that time and has since been living in the country. He was perfectly willing to do so if the man was in proper condition. advised a re-examination and arranged for it. As the physician could not feel sure that the man would be able to stand this kind of work he returned to the country. The employer had a marked case of phthisiphobia when the investigation was asked for and we are very much gratified that our work has resulted in such a rational frame of mind that he is willing to employ a man who has had active pulmonary tuberculosis, providing the physician feels that the man is able to

stand the work and is no longer a source of danger to others. An examination safeguards the patient too by warning him of any danger such employment would mean.

A social agency in the city asked us about the advisability of employing an ex-sanatorium patient in a clerical position. At the time their office was visited one of the workers had a severe cold, was using no particular care when coughing or expectorating, and had all windows closed. We convinced them that any one who had learned the value of fresh air (as the sanatorium patients do) would prove a blessing to the whole force. Such a person would be determined to have fresh air and those in the same office would therefore have it forced upon them. This would soon mean better health for all. The woman in question was employed, and so far no bad results have been reported.

#### RESULT OF FIVE YEARS WORK.

Number of patients under supervision January 1, 1910	398
Total	11,795
Number of patients died during five years 4,151	
Number that left the city	
Lost (moved, address unknown)	
Not tuberculous	
Total	8,138
Not counted thru error in index	3,657 72
Patients under supervision December 31, 1914	3,729

# Visits.

Years.	To Patients.		Co-operative.	Before Fumi- gation.	After Fumi-	gation.	Total.
1910	72,0	75 58 743	4,861 2,423 2,841 3,075 4,059	2,909 2,880 3,137 3,327 3,303	2,9, 2,8, 2,9, 3,1, 3,0	33 92 44	66,824 69,311 81,028 79,289 82,726
Total	331,3	1 689	7,259	15,556	14,9%	74	379,178
1910							. 1,312 . 1,547 . 1,472 . 1,505
Years.	Dispensaries.	Municipal Tuber- culosis Hospital.	State Sanatorium.	Eudowood.	Jewish Home for Consumptives.	Other Sanatoria.	Total to Sanatoria.
1910: 1911: 1912: 1913:	2,903 1,917 3,082 3,375 2,785	339 291 310 298 286	109 180 295	100	25 33 53 61 94		550 542 666 770 851
Total	14,062	1,524	1,056	532	266	1	3,379

Sources from which Patients are Obtained.

Total.	4,208 1,816 1,892 1,777 1,704	11,397
Miscellaneous.	218 67 76 59 59	477
Baltimore General Dispensary.		2
City Medical Agencies.	337	187
Health Department Tuberculosis Dispensaries.	133	222
Maryland University Tuber- culosis Dispensary.	107 20 30 30 30	357
Phipps Tuberculosis Dispen- sary.	431 418 406 439	2,085
Harriet Lane Dispensary.	· · · · · · · · · · · · · · · · · · ·	TO.
Johns Hopkins Hospital.	4	4
Mercy Hospital.		-
Hebrew Federated Charities.		6
Federated Charities.	155 116 103 60 59	493
Jewish Home for Consump- tives.	: : :	14
State Sanatorium.	97 75 108 156	507
Eudowood.	8 88 8 0 10 10 10 10 10 10 10 10 10 10 10 10 10 1	132
Municipal Tuberculosis Hos- pital, City Office.	14 6 14 17 17 17 17 17 17 17 17 17 17 17 17 17	234
State Board of Health.	115	468
Instructive Visiting Murses Association.	*1,729 115 121 75 50	653 *2,090
Patients, Family, or Friends.	136 159 163 17	653
Reported by Physicians.	25 85 52 58 58 58 58 58 58 58 58 58 58 58 58 58	1,777
Found by Murses.	706 358 251 214 157	1,686
YEARS.	1910 1911 1912 1913	Total

\*1,617 patients transferred January 1, 1910, when Division was organized.

The apparent decrease in number reported by physicians and increase in those reported by State Board of Health in 1913 and 1914 is due to the fact that those cases obtained from doctors who had sputum analyses made in the Laboratory have been erroneously credited to the State Board instead of to physicians. This error was discovered too late to correct the table.

Referred for Relief and Diet.

YEARS.	Fede Char		Heb Fede Char	rated	St. Vi de I Soci	Paul	То	tal.
1 EAR5.	Relief.	Diet.	Relief.	Diet.	Relief.	Diet.	Relief.	Diet.
1910	316 238 337 247 90	73 30 55 20 29	4 8	3	5 3	] 	248 344 266	76 31 55 23 34
Total	1,228	207	47	7	40	5	1,315	219

# Fumigations.

							Aft	er Ren	After Removal to-							
Vranc	After Death		Municipal Tuberculosis Hospital.	cipal ulosis ital.	State Sanatorii	ite rium.	Eudowood.	vood.	Jewish Home for Consumptives.	ish for imp-	Other Quarters.	ner ters.	Total.	al.	Total.	녆
1	Иесеѕѕату.	Not Necessary.	Иесеѕѕяту.	Not Necessary.	Иесеѕѕяту.	Not Necessary.	Necessary	Not Necessary.	Иесеѕѕату.	Not Necessary.	Иесеѕѕяту.	Not Necessary.	Necessary.	Not Necessary.	Necessary.	Not Necessary.
1910	1,162 1,186 1,157 1,107 1,107	228448	430 379 410 383	21 8 3 2 8	220 308 246 460 573	13 26 12 34	93 132 128 132 143	£ 48 00	62 67 83	41918	938 1,110 949 1,108 1,082		1,742 2,011 1,769 2,186 2,264	8 2 8 8 3	2,904 3,197 2,926 3,293 3,374	120 178 157 130 143
Total	5,722	278	2,001	304	1,807	88	628	31	349	H	5,187	9	9,972	112	450 15,694	728

Results of Instruction as to Cleaning, etc., Following Fumigations.

 	Papering, Painting, and Whitewashing.	65 108 102	410
11.	Bedding, etc., Sterilized.*	213	577
Fumigation After Removal	Bedding, etc., Burned.	119 95 163 202	8
After	Total Houses.	1,626 1,643 1,855 2,055 2,064	9,243
igation	Houses Vacant.	281 302 291 258 231	1,363
Fun	Houses Not Cleaned.	398 273 335 270 174	1,450
	Houses Cleaned.	947 1,068 1,229 1,527 1,659	6,430
	Papering, Painting, and Whitewashing.	9401 848 875 875	314
h.	Bedding, etc., Sterilized.*	246 379 383	1,008
Fumigation After Death	Bedding, etc., Burned.	461 423 418 402 336	2,040
n Afte	Total Houses.	1,108 1,098 1,096 1,044 1,028	5,374
migatio	Houses Vacant.	% 77 77 71	351
Ħ	Houses Not Cleaned.	280 172 198 141 110	8
	Houses Cleaned.	766 850 821 838	4,122
	YEARS.	1910. 1911. 1912. 1913.	Total

\*Municipal steam sterilizer not obtained until 1912.

#### HEALTH DEPARTMENT.

### Articles of Clothing, Bedding, etc., Destroyed and Sterilized.

YEARS.	Destroyed.	Sterilized.
1909	*317 1,148 1,050 1,346 1,274 1,368	†1,916 3,479 3,848
Total	6,503	9,243

<sup>\*</sup>Year before Tuberculosis Nurses Division was organized. †Year municipal sterilizing plant was put into operation.

# Patients Under Supervision Before Death.

Years.	Total Number of Deaths.	Number Under Supervision.	Per Cent.
1910	1,189 1,129	776 814 856 867 838	62.88 69.87 71.91 76.79 73.18

#### Death Rate per 1,000 Population.

YEARS.	Total.	White.	Negro.
1909	2.53	1.93 1.86	5. <i>7</i> 9 5.61
1910	2.47 2.38	1.76	5.79
1912	2.36 2.51	1.79 1.71	5·57 5.85
1914	2.26	1.70	5.41

It is reasonable to suppose that the care, superficial as it must be since the work has become so heavy, that 16 nurses have been able to give the 11,795 patients under their care during these five years in the 379,178 visits has had at least some share in the slight lowering of the death rate that has taken place. If we study what some of their work has been we may be led to believe that their part in this campaign has been an important one indeed. They have found 1,686 patients and have had them diagnosed. They have sent 14,062 to dispensaries, 3,379 to sanatoria. If nurses had not been in the field to visit and re-visit until they were able to persuade these people to avail themselves of the opportunities the city and state have offered to the tuberculous, how many of them would have received their benefits? 15,556 visits were paid to arrange for fumigation after death and removal and 14,974 others were inspections following. One of the above tables shows how much co-operation they have been able to get from the householders in the way of cleaning, painting, re-papering, whitewashing, etc., and in the number of articles destroyed and sterilized, without which the fumigations would have been practically valueless.

The table showing the sources from which cases have been obtained indicates clearly that the people and organizations who have availed themselves of our help have been sufficiently satisfied with the results to continue. The nurses do not find as many cases as formerly—partly because with the increase in the visiting list time for ferreting out and following up suspects has necessarily been greatly limited, and partly because the people, as the result of the nurses' instructions in former instances, now seek of their own accord their physicians or the dispensaries as soon as any symptoms appear.

That the nurses' services alone, or even aided by dispensaries only, cannot do much more than prevent an increase in the death rate is shown by those for the colored people during the last six years. Institutional care for advanced cases, decent

housing conditions and schools are essential for any success in this direction. As the mortality among the colored people is three times as great as among white the necessity for strenuous efforts in their behalf is very great. The two races are so exceedingly interdependent here that one cannot suffer without affecting the other. The white people must help to eradicate tuberculosis among the colored from selfish motives if not from humanitarian ones.

#### NEEDS.

Besides another dispensary in the northern section of the city we need an assistant dispensary physician so that the Bond Street and Light Street Dispensaries can be open oftener than twice a week. There has not been a day this year that patients, frequently many, have not had to be turned away from Bond Street and very few days when the condition has not been the same at Light Street owing to lack of time to examine them—altho the staff instead of closing the dispensary at four has worked until six and sometimes later.

The housing conditions for our Jewish, Polish (in fact all immigrants), and colored people are very bad indeed. The new sewerage system is helping greatly to abolish some of the defects. But houses built for one family cannot be made to hold many times that number—even up to ten or more—unless they are radically changed. A hydrant in the back yard, frequently frozen in winter, as the only source of water supply, is not conducive to cleanliness. Rooms without windows and houses without sunlight and with no furnace to warm and dry them will not promote or even allow good health.

All of our schools should be open-window ones at least. Probably one of the greatest benefits of our only fresh air classroom has been its effect on the other teachers and consequently on their rooms. One who had been very susceptible to colds and, as so frequently follows, greatly afraid of draughts undertook to accustom herself and her pupils grad-

ually to open windows after seeing the effect on teachers and pupils of being out of doors. The change was marked—many less colds, better general health, red cheeks, and an increase in weight. Others have followed the example until the whole school is gradually becoming an open-window one. Even more important, however, than an increase in the number of fresh air classes for sick children and open-window ones for well would be a universal adoption for all grades of Miss Miller's "Baltimore Idea."

There is constant agitation for a central hospital for advanced cases in the state—or for several of them. These will not solve the problem. Very ill patients will not go far away from home to die nor will they go to a place that has the reputation for a high death rate. It would be far less expensive to add wards for tuberculous patients to already established hospitals and these would overcome all objections that patients and friends could raise. They would be as near every one as any general hospital, the patients could go to one they knew and liked, enough people would recover and go home well from other wards of these institutions to take away the feeling that admission to them meant death, and as persons with all kinds of diseases would be admitted going there would not so markedly brand them as tuberculous.

As such an arrangement not only has been tried in other cities but has been continued and expanded there is no reason to fear that results here would be any less satisfactory. We have tuberculous patients in our hospitals at present not in separate wards but by the side of others not tuberculous who by their lowered resistance thru ill health or injury are very fit subjects for infection. Separate wards, even tho containing more tuberculous patients than are at present scattered thruout the hospitals, would be far less dangerous. During the year 49 people have been reported by 6 of our hospitals as being patients there with pulmonary tuberculosis

(these are only the ones they have remembered to report) and 81 have died in 14 of them.

We need for our colored people better schools and houses and wards for advanced cases in all general hospitals. A sanatorium for them until housing and school conditions are improved will be futile. But even such things will not achieve their greatest usefulness unless the colored people, themselves, co-operate in every way—better housekeeping in their own homes, more wisely chosen food, saner recreation, and less immorality must be attained thru their own efforts before such concrete things as houses and hospitals, no matter how abundant and adequate, can help them in any degree to escape tuberculosis. Many of them have given us this co-operation and it is this alone that has kept the death rate from going any higher, but many more must do so before any marked decrease will be shown—no matter what provision for their care the city and state will make.

One of the most glaring needs at present, and a very important one, is an institution for pregnant tuberculous women where they can remain in bed as long as required before confinement to conserve their strength sufficiently, where their babies can be born under good conditions, and where they can stay in bed or at least at rest long enough afterward to keep them from breaking down again. It does not seem to matter how well women may be, if they have had a tuberculous breakdown previously, unless the greatest precautions are taken during this period, the additional drain on their strength makes them succumb again. Then they not only are added to the list needing care but also become dangerous to their babies. It would therefore seem economy to provide a place for them which would prevent such relapses rather than to care for two ill people later in place of every one.

#### ADDITIONAL NURSES.

As has been said above, the number of patients that 16 nurses have attempted to care for this year has increased from

3,400, or an average of 212½, to 3,729, or an average of 233, and the number of visits from 78,289 to 82,726. This has been accomplished only by the nurses working overtime. In December alone this amounted to 287 hours or 35% days of eight hours each—an average of nearly 2¾ days that each nurse gave the city because her patients, Baltimore citizens, required it for their own sakes and to protect the other residents of the city. A Christmas gift to the city in one month alone of \$6.78½ from each nurse!

Even with this extra effort the work has not been thoro. Almost daily complaints have come in by telephone and by mail that a nurse has not seen some patient for several weeks or a month and investigations have revealed only the reason that some other patient's needs seemed more urgent and consumed the time. These will become more numerous as the number of patients under supervision increases and they are an index of the work that is being left undone. Anything in this field that is not done means that many sources of infection unchecked. As I said last year, no nurse can properly care for more than 100 patients. It is necessary to increase the staff to  $2\frac{1}{4}$  times its present size to reduce the number of patients sufficiently.

Much of the nurses' time is now taken up with statistical and clerical work. As they are untrained along these lines it takes them longer than it would a trained person and the result is less for actual visiting. The amount of clerical work which must be done by the superintendent takes practically all of her time and consequently she cannot supervise the field work. This should not be the case. New nurses need careful supervision and the older ones who have lost their enthusiasm and have become discouraged require the spur that oversight gives. If there is a nurse on the staff who is ill-fitted for the work or untrustworthy, careful and constant supervision is the only thing that can detect it. Two ste-

nographers could be kept busy and the records would then be far more accurate and the nurses would be free to spend more time in the district.

#### Co-Ordination of Nursing Work.

The advisability of combining all nursing organizations, and possibly both nursing and social ones, is being so universally discussed at present that it does not seem proper to close my report without referring to it. This reorganization would mean that each worker would have to be responsible for all kinds of nursing and instruction—general and special—and probably for the social reconstruction of families as well. Therefore, each one of the many nurses needed would have to be an unusual woman indeed, be trained as a public health nurse and a social worker, and keep herself well posted along both lines of work as well as keeping up with the work itself. The splendid co-operation of all medical-social agencies in Baltimore has avoided much of the duplication we hear of in other cities but there is some even here. A reaction, however, may readily lead to the other extreme and result in one person, trained along a single line only, attempting to do so many kinds of work-each requiring special preparation-that mediocrity or even inefficiency will supplant duplication. rural nurse is a public health nurse and social worker. Yet do not all organizations constantly speak of the necessity for raising standards in rural work and of upholding the nurse with high standards against public opinion which for the time being is interested in only one line of effort? Do the National Organization for the Study and Prevention of Tuberculosis and the one for Infant Mortality get their best results and statistics to prove their successes or failures from the overburdened rural nurse or the specially trained tuberculosis and infant mortality urban nurses in organizations which devote their entire time to but one subject? Would any one wish to remodel city medical lines to conform to those of the country

doctor—conscientious, self-sacrificing, and faithful the he be and an absolute necessity in our national life—after having been blessed with the benefits of consultation with and treatment by specialists in their offices, in hospitals, or dispensaries?

There should be some co-ordination but not enough to give less good care to any class of patients nor (in public health work especially) poorer statistical information for use in any campaign against preventable disease. At present I feel that we need three organizations for medical-social work; one of social workers to look after family rehabilitation and personal readjustments to changed conditions, one to give nursing service at home for a moderate fee to all who wish to take advantage of it, and one to attend all families in which there is any condition that affects public health.

The first, I feel, should be a private organization or, if a public one, connected with a Bureau of Social Service as it is in Toronto, Canada, not with a Department of Charities, so that people could be kept from falling below the poverty line instead of being helped only after charity has become necessary. If the organization is private, the governmental department of charities should call upon it for investigations and information but should pay for all such work. The workers' training should be along the lines of philanthropy and social and political economy. Nurses training is unessential.

The second would be our Instructive Visiting Nurses Associations and should in no way be allied with a charitable organization, public or private. Every visit should represent a fixed fee paid into the treasury of the organization so that no one would feel that a visit from a nurse on its staff might mean an unpaid service to any one in the neighborhood and therefore hesitate to call on them. This does not mean that nursing care would be withheld from those unable to pay—only that Nursing Organizations be paid for all they do. Until we have some workable system of compulsory sickness and accident insurance, there will always be people unable to pay for

medical and nursing care. When, however, a nurse finds a family in such circumstances and unprotected by sickness insurance in a commercial company or benefit society—lodge, industrial, or otherwise—she should report the case to the private or public agency which handles all failures in family adjustment to meet the ordinary or unusual needs that arise. In this way a temporary service will not be given free without continued effort to lift the family above the same condition in the future. Is it any better to give so many dollars' worth of nursing service and instruction and then to leave the recipient than to give material relief and think that the case is closed? If there are not enough institutional beds for all acute and chronic cases unable to pay for the nursing care which they need (and there never will be) should not nursing service at home be paid for by private or public agencies just as doctors' fees, prescriptions, groceries, rent, etc. are until the family have been raised above these needs? As long as funds for free nursing come from the treasuries of Nursing Associations the stigma of charity will cling more or less closely to that service and many who need it sadly will not avail themselves of it. A far different impression will be given when it is a foregone conclusion that all nursing visits are paid for either by the family or by the social worker when she is in attendance. The social worker will then be the index of the necessity for family readjustment, financial or otherwise, and the nurse for ill health. This is not said in the slightest disparagement of the work and function of social workers. It is to the advantage of their work that all people be reached as quickly as possible who need nursing service and the instruction in hygiene that accompanies it in order to keep them from falling below the poverty lines because of ill health. People in such precarious circumstances are hyper-sensitive and will hide their need for financial assistance much longer than that for nursing care. Every legitimate means should be provided that will enable them to get it without any stigma of charity in order to pro-

duce a more rapid return to good health and the better economic condition that goes with it. If the nurses are in attendance upon these border-line cases the social workers will reach them sooner, and vice versa, thus lessening the relief necessary. In order to reach the greatest number of people by an inexpensive nursing service the fact that it is absolutely a business enterprise must be greatly emphasized. This has already been shown in papers at the annual meetings of the National Organization for Public Health Nursing by Dr. Frankel at Atlantic City and Miss Peabody at St. Louis. Hourly nursing should be combined with district nursing and instruction. Until public opinion considers ill health a community problem in the same sense that it now accepts crime and fire, this class of nursing cannot be taken over by the city or state except in connection with the Department of Charities and this would cut off many who need it greatly.

Thirdly, nursing and instruction in those diseases and conditions which are generally recognized as menaces to public health should be taken over by a protective rather than a charitable department of government so that all classes of society may receive the benefits. The fields of effort would be infant mortality, school hygiene, infectious diseases including not only the so-called contagious diseases but typhoid fever, tuberculosis, and probably all the reportable ones, cancer, and the various mental abnormalities. Here it appears quite necessary to co-ordinate nursing work. One nurse might do all of this with proper supervision—that is for each branch under the direction of one specially trained in that work watching and guiding the field nurse in all families into which this particular problem enters. The difficulties to be met in such a plan would be the fear in infant mortality work of infection from some contagious disease, the danger of cross-infections, and, last but not least, the possibility of friction and discontent arising from each nurse being responsible to several different supervisors—one for infant mortality, one for school hygiene,

one for contagious diseases, one for tuberculosis, etc. They all seem to be adjustable ones, however. The medical profession is leading the way in showing that simply by means of glass cubicles different contagious diseases can be treated in the same ward by the same nurses without cross-infection. Doctors daily go from contagious cases to new-born babes or even obstetrical work (public health nurses should under no circumstances do obstetrical work) without any evil results unless there has been gross carelessness. Caps and gowns in the hallways of homes to be put on upon entering the houses and removed before thoroly cleaning the hands in disinfectant when leaving would be sufficient safeguards and far more than many physicians deem necessary. Besides this the daily work would be planned so that well babies would be taken care of the first thing in the morning and patients with contagious diseases the last thing in the afternoon. The unpleasantness that might arise from many overseers seems the most difficult one but as that is being worked out satisfactorily in Toronto apparently even it can be successfully overcome.

It is probably in the field of public health nursing that most duplication occurs for there are so apt to be babies, school children, infectious and contagious diseases, and even mental deficiency, and cancer in one family. All of these nurses are overworked at present but with many fields of endeavor and smaller districts with no duplication of effort their burdens would probably be lessened. They would give the nursing care necessary in their work and all public health matters should be referred to them.

There may be one big objection to this co-ordination. All those boards who have had to finance private nursing organizations or to urge larger appropriations for public ones realize how difficult it is to get a sufficient amount of money for all the work even when there have been many interested, each using all its efforts and powers of persuasion and appealing at different times. Will it be easier for one set of people

to ask for many times the amount from only one source at one time? Apparently Cleveland in appealing for funds for all private charities has found a united effort best. Baltimore has sufficient faith in the example to follow it and if it proves to be well founded this objection will not be valid.

Respectfully submitted,

ELEANOR A. McI. Jones, R. N., Superintendent, Tuberculosis Nurses' Division.

## Report of the Municipal Tuberculosis Dispensaries.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

DEAR SIR:

During the year of 1914 the dispensaries handled approximately the same number of cases as in the preceding year, but an analysis will, perhaps, be interesting.

Although the total number of cases examined falls a little below that of last year, the proportion of those found positive is greater.

It is somewhat difficult to say why this should be, and several reasons may be advanced, but we are certainly not far wrong in stating that in the sections where the dispensaries are located the public generally is coming to know them as a place where, if they have tuberculosis, they will get proper treatment, and if they are suffering from some other ailment they will be advised as to where they should go and how they should act; this, to bring out the fact that many of those cases who were suspicious of what treatment they would receive, overcame that feeling, and of course were benefited thereby.

The relatively small number who entered sanatoria in comparison to the number advised, only emphasizes what was stated in our report of last year, namely, the disinclination of the women for the reason that there would be no one to look after the children, and on the part of the men that there would be no one to support their families. It can be readily seen why tuberculosis is becoming more and more a problem for the sociologist.

It is a matter of gratification that increasing numbers are coming to us from the various charity organizations, from other dispensaries, sent by friends, and particularly by other physicians.

The work of 1914 has brought out more clearly, perhaps, than ever before, the need of additional facilities for handling tuberculous negroes, particularly those of the advanced stage. At present we urge and exhort them to undergo treatment. The writer hopes that the day is not far distant when, instead of having to be urged to undergo treatment, that this type of patient will, when they are told what their disease is, voluntarily ask to go to a place which will have gained a reputation amongst the colored people.

Probably this will be better understood when we state that in the case of the whites, oftentimes they come of their own volition and ask to be sent to the State Sanatorium. This, in our judgment, is not only a tribute to the State Sanatorium, but it is the one thing to be desired, for the incentive will be theirs, and a big step forward will have been made.

It is our judgment that a fourth dispensary should be started in the northern section of the city. It is true that a fair number from this part of the city come to the McCulloh Street Dispensary, but it is quite certain that this section would supply a sufficient number of patients to justify the opening of a new dispensary.

During the year a special recommendation was made for the appointment of an assistant. It might be better to consider the appointment of the assistant and the establishment of the dispensary at the same time. If we are to elaborate this work—and it is our earnest desire that in the near future the dispensaries will be on the same plane as those of the other large cities—we should certainly have another physician. One man cannot make many thorough examinations in an afternoon, and since the opening of the dispensaries in 1911 it has been the invariable rule that every new patient be examined. This

is mentioned merely for the purpose of calling attention to the fact that time is the most important factor. Just to mention one matter in which time could be saved: one physician could be examining whilst the other is treating old cases. This method, of course, is followed in most dispensaries.

It is our desire also to have fluoroscopic examinations. This also would be dependent upon the appointment of another physician.

It is a pleasure to acknowledge the real help received from the Tuberculosis Nurses; their work has been thorough and their co-operation highly appreciated.

Very respectfully,

JOHN E. O. NEILL, M. D., Superintendent.

lear 1914.	
Year	
the	
for	
Dispensaries	
Tuberculosis	
Municipal	
fo	
Summary	

Came of Own Accord.	∞ H 04	11
Sent by Other Physicians.	15 27 12	24
Sent by Other Dispensaries.	45 15 22	8
Sent by Friends.	23	139
Sent by Federated Charities.	888	129
Sent by Other Nurses.	22 0	4
Sent by Tuberculosis Nurses.	888	330
Sputum Reports.	8,4%	169
Advised Other Clinics.	488	125
Entered Sanatorium.	22.30	8
Advised Sanatorium.	888	171
Prescriptions Given.	850 483 217	1,550
Old Patients Returned.	570 422 141	84 1,133 1,550
Colored.	17 10 57	8
White.	364	705
Negative.	85.00	277
Suspicious.	¥ 8 4 7	289
Positive.	53.	223
New Patients.	381	82
Dispensaries.	602 South Bond Street 1418 Light Street	Total

# REPORTS OF

Chief Tenement House Inspector

Superintendent of Fumigations and Burials

Superintendent of City Morgue

Inspector of Plumbing

Registrar's Clerk

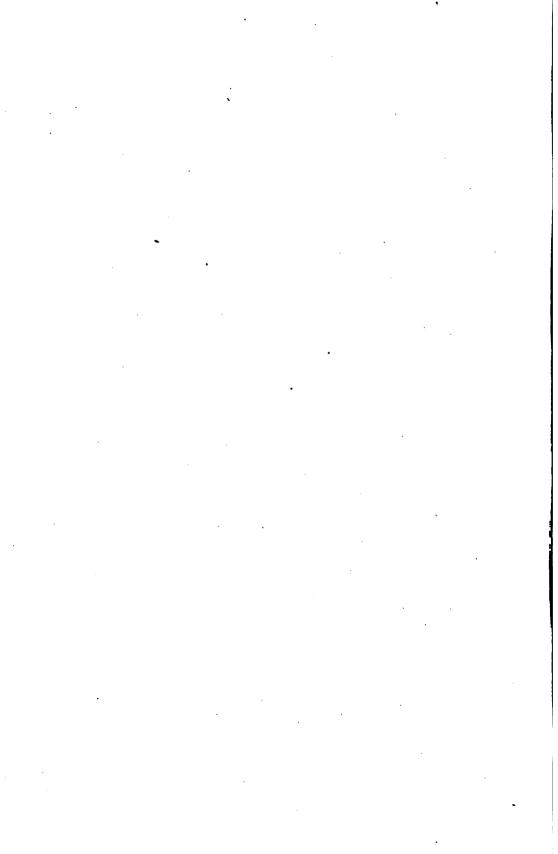
Complaint Clerk

**Burial Permit Clerks** 

Nuisance Clerk

Index Clerk

Clerk to Bureau of Vital Statistics



## Report of Chief Tenement House Inspector.

BALTIMORE, December 31, 1914.

NATHAN R. GORTER, M. D.,

Commissioner of Health.

#### DEAR SIR:

In accordance with the custom of preceding years, I beg leave to submit my annual report, as Tenement House Inspector, for the year ending December 31, 1914.

Nuisanges open og ponding	- 6
Nuisances open or pending	1,644
Nuisances ordered abated	1,340
Notices issued	522
Notices requested to call	49
Notices to tenants requesting them to keep clean	24
Houses inspected	2,441
Houses reinspected	4,161
Special inspections	595
Complaints investigated	160
Hoppers or frost-proof closets installed	892
Interior water closets installed	305
Bath tubs installed	188
Privies cleaned	600
Privy wells filled	526
Privies repaired	6
Water installed	5
Water removed from cellar	I
Waste pipes repaired	15
Water closets repaired	25
Walls of rooms, halls and stairways papered or whitewashed	50
Warrants to show cause	10
Rubbish removed from yards and cellars	59

## REPORT OF THE

Roofs repaired
Rain leaders repaired
Yards repaired
Premises cleaned
filthy mattresses removed
Miscellaneous repairs
Jusanitary basement vacated
Towls removed from basement

Respectfully submitted,

D. W. SMITH, M. D., Chief Tenement House Inspector.

## Report of Superintendent of Fumigations and Burials.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

## DEAR SIR:

I herewith submit the report of my Division for the year 1914:

### Fumigations Classified by Diseases.

	1913.	1914.
Bronchitis	5 -	1
Cancer	23	24
Chickenpox	I	3
Cerebro-spinal meningitis	3	I
Diphtheria	1,122	1,177
Erysipelas	7	14
Gangrene	I	
Lagrippe	I	I
Measles	33	2
Pneumonia	7	6
Scarlet fever	948	651
Septic pharyngitis		I
Smallpox	42	270
Tuberculosis	3,161	3,148
Typhoid fever	40	29
Tonsilitis	2	4
Unknown	16	7
Whooping cough	I	I
Total	5,413	5,340

### REPORT OF THE

Results of Fumigation.	1913.	1914.
Negative	4,860	4,330
Positive	319	425
Unreturned	186	317
No culture	48	268
Total	5,413	5,340
Diseases. Number of Rooms Fumigated.	1913.	1914.
Diphtheria	2,148	2,106
Miscellaneous	308	242
Smallpox	218	767
Scarlet fever	1,832	1,371
Tuberculosis	14,953	13,909
Total	19,459	18,395
Statement of dead bodies turned over to the	Anato	omica1
Board by the Commissioner of Health, under Act	of the	Gen-
eral Assembly of Maryland, Chapter 163, 1882,		
only to promote medical schools of Baltimore ci		
	ity, Ja	nuary
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:	ity, Ja 1913.	nu <b>a</b> ry 1914.
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:  Adults	ity, Ja 1913. 240	nuary 1914. 243
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:  Adults  Between 1 and 5 years	ity, Ja 1913. 240 25	nuary 1914. 243 24
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:  Adults  Between 1 and 5 years  Under 1 year	1913. 240 25 191	1914. 243 24 155
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:  Adults  Between 1 and 5 years	ity, Ja 1913. 240 25	nuary 1914. 243 24
only to promote medical schools of Baltimore ci 1 to December 31, 1914, inclusive:  Adults  Between 1 and 5 years  Under 1 year	1913. 240 25 191	1914. 243 24 155
only to promote medical schools of Baltimore circle 1 to December 31, 1914, inclusive:  Adults Between 1 and 5 years Under 1 year Still births  Total  Male	1913. 240 25 191 364	1914. 243 24 155 458
only to promote medical schools of Baltimore ci I to December 3I, 1914, inclusive:  Adults Between I and 5 years Under I year Still births	1913. 240 25 191 364	1914. 243 24 155 458 ———
only to promote medical schools of Baltimore ci I to December 3I, 1914, inclusive:  Adults Between I and 5 years. Under I year. Still births  Total.	1913. 240 25 191 364 820 502	1914. 243 24 155 458 880
only to promote medical schools of Baltimore ci I to December 3I, 1914, inclusive:  Adults Between I and 5 years. Under I year. Still births  Total.  Male Female	1913. 240 25 191 364 820 502 286	1914. 243 24 155 458 —————————————————————————————————
only to promote medical schools of Baltimore of I to December 31, 1914, inclusive:  Adults Between I and 5 years. Under I year. Still births  Total.  Male Female Unknown sex  Total.	1913. 240 25 191 364 820 502 286 32	1914. 243 24 155 458 880 505 321 54
only to promote medical schools of Baltimore of I to December 31, 1914, inclusive:  Adults Between I and 5 years. Under I year. Still births  Total.  Male Female Unknown sex  Total.  White Black	1913. 240 25 191 364 820 502 286 32	1914. 243 24 155 458 —————————————————————————————————
only to promote medical schools of Baltimore of I to December 31, 1914, inclusive:  Adults Between I and 5 years. Under I year. Still births  Total.  Male Female Unknown sex  Total.	1913. 240 25 191 364 820 502 286 32 820	1914. 243 24 155 458 —————————————————————————————————

The bodies were received from the following	hospitals	and
institutions:	1913.	1914.
Bay View		III
Church Home and Infirmary	3	2
Franklin Square Hospital		6
Hebrew Hospital	. 2	
Homeopathic Hospital	. 6	6
Johns Hopkins Hopsital	62	81
Maryland General Hospital	46	29
Mercy Hospital	35	54
Mt. Wilson, Md	-	10
Miscellaneous (private homes)	317	384
Morgue		68
Nursery and Child's Hospital		11
Northwestern Police Station		12
Northeastern Police Station		5
Northern Police Station	4	6
Robert Garrett Hospital		I
St. Elizabeth's Home		32
St. Joseph's Hospital	9	16
St. Luke's Hospital	2	
University Hospital	51	40
Union Protestant Infirmary		. 1
Western Police Station		4
Woman's Hospital	•••	I
Total	820	880
Disposition of Bodies.	1913.	1914.
Baltimore Medical College	9	
Church Home and Infirmary	2	2
College of Physicians and Surgeons	429	472
Franklin Square Hospital	I	
Hebrew Hospital	3	
Johns Hopkins Medical School	246	229
Maryland Medical College	2	ī
St. Joseph's Hospital	2	I
University of Maryland	126	174
Henry B. Kolb, M. D	•••	I
Total	820	<b>88</b> 0

## Total Number of Dead Bodies Handled by Health Department.

		1914.
Buried in Potter's Field	55	59
Surrendered to friends for burial		
Transferred to Anatomy Board	802	870
<i>,</i>		
Total	875	939

## The following were goods destroyed and sterilized:

	Destroyed.		Destroyed. Sterilize		ized.
·	1913.	1914.	1913.	1914.	
Blankets	32	37	350	547	
Bolsters	59	54	384	407	
Bed quilts	29	56	68	60	
Books	5	3	• • •	3	
Carpets	25	4	11	2ე	
Comforts	105	130	291	321	
Couches	25	17	8	• • •	
Clothing (bundles of)	74	73	66	93	
Cushions	4	11	<i>7</i> 8	75	
Curtains	2	14	II		
Feather beds	23	18	190	195	
Mattresses	522	521	296	260	
Pillows	225	325	1,616	1,760	
Portieres	5	4	31	4	
Rugs	10	15	77	41	
Rolls of matting	109	64	5	I	
Sheets	14	14	II	21	
Spreads	6	8	13	37	
Total	1,274	1,368	3,479	3,848	

#### SMALLPOX.

The smallpox patients and suspects sent to Quarantine Hospital during the year by this Division were reported by physicians or through the Police Department. Immediately upon receiving such a report, guards were sent to the premises until our ambulance arrived to convey the patient or patients to our detention rooms, where they were fed and cared for.

After being passed upon by C. Hampson Jones, M. D., Assistant Health Commissioner, they were sent in the Department ambulance to the Quarantine tug, which carried them to the Quarantine Station. The report is as follows:

	Smallpox.		Quara	ntined.
	1913.	1914.	1913.	1914.
White	2	50		7 76
Black	40	275	110	76
Total	42	325	110	83
	Sma	llpox.	Quara	ntined.
	1913.	1914.	1913.	1914.
Male	29	275	49	25
Female	13	50	61	58
Total	42	325	110	83

Respectfully submitted,

WILLIAM E. WOODALL OF W., Superintendent of Fumigation and Burial of Pauper Dead.

# Report of Superintendent of City Morgue.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D.,

Commissioner of Health.

## DEAR SIR:

The following is a report for the year 1914 of the City Morgue:

	1913.	1914.
Number of bodies received	<b>380</b>	394
White	230	233
Black	150	151
Male	310	318
Female	<i>7</i> 0	76
Ages:		
From I to 10 years	42	52
From II to 20 years	45	28
From 21 to 30 years	58	<b>7</b> 7
From 31 to 40 years	88	82
From 41 to 50 years	<i>7</i> 9 .	78
From 51 to 60 years	34	43
From 61 to 70 years	24	34

Causes of Death.	1913.	1914.
Accident	63	50
Alcoholism	9	17
Apoplexy	20	22
Bright's disease	7	17
Burns	4	I
Congestion of lungs	1	
Drowned	64	54
Dropsy		2
Exposure	I	3
Fractured skull	3	7
Heart disease	68	56
Heart failure :		7
Hemorrhage	6	5
Heat prostration		2
Homicide	35	36
Meningitis	1.	2
Peritonitis	2	. 5
Pneumonia	14	15
Septicemia		I
Still birth	23	21
Suicide	26	34
Toxemia	11	2
Tuberculosis	11	28
Typhoid fever	2	
Uremia	7	7
Unknown	2	
Bodies buried by friends	255	265
Bodies buried by city	1 <b>2</b> 6	124
Bodies now at Morgue	5	5
Post-mortems held by Dr. N. G. Keirle	<i>7</i> 8	67
Incinerating plant, working days	263	284
Sterilizing plant, working days	240	254

# Respectfully submitted,

AUGUST H. RITTMILLER,

Superintendent of City Morgue.

# Report of Inspector of Plumbing.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

### DEAR SIR:

I herewith submit the annual report of the work executed by the Division of Plumbing and Drainage for the fiscal year ending December 31, 1914.

#### Permits Issued.

Months.	Interior.	Drain.	Sanitary Sewers.	Total.
January	200	18	1,438	1,665
February	104	12	1,389	1,505
March	256	18	1,517	1,791
April	294	27	1,844	2,165
May	354	20	1.666	2,040
June	325	12	1,850	2,187
July	296	6	1,874	2,176
August	286	17	1,582	1.885
September	375	15	1,800	2,100
October	254	15	1,001	2,260
November	226	17	1,600	1,843
December	240	12	2,182	2,434
Total	3,219	189	20,742	24,150

Plumbing Inspections Made by Inspectors.

Total.	4,236 3,461 3,325 4,425 5,707 4,323 3,128 4,856 4,073 4,979	50,597
Forster,	275 275 275 275 275 275 275 275 275 275	4,971
Hagan.	300 300 340 340 340 350 350 350 350	4,178
Keen.	%%%	437
Pruitt.	439 287 287 439 413 254 202 404 165	3,424
Curran.	255 259 259 259 259 259 259 259 259 259	1,231 4,386
Keller.	93 291 318 529	1,231
Kneise.	325 299 225 333 333 313 313 264	2,425
Martin.	889 865 865 865 865 865 865 865 865 865 865	2,668
Sullivan.	626 628 627 117 118 118 118 118 118 118 118 118 11	5,382
Reed.	317 286 122 378 378 379 331 251 176 176 176	4,036 3,615 5,382
Dotsey.	317 324 338 337 337 343 372 372 372 372	4,036
Gessler.	332 252 332 332 332 332 332 332 332 332	4,133
Smith.		2,462
Truelove.	383 313 323 343 363 363 363 364 364	4,251
Months.	January February March April May June July September October November December	Total

Sanitory and Drain Inspections.

Monwite	Gorman	 nan.	Ebberts.	erts.		ith.	To	Total.
	Sanitary.	Drain.	Sanitary.	Drain.	Sanitary.	Drain.	Sanitary.	Drain.
January			244	200	256	01	200	35
March	159	8 4	210	8 0	355	13	787	3, K
April. May	300	33 69	863	10	384	1,5 1,5 1,5	857 1,069	8 %
June	227	51	179	8	227	m c	633	% ?
August	34.1	6 <del>1</del> 4	231		633	y ⊢	1,205	¥ &,
September	140 230	24 %	215	O 10	750 308 750 308	oo	723 601	8 <del>1</del>
November	415	31	205	0.0	256	0	876	. <b>2</b> 5
December	<del>2</del>	<b>4</b> 5	235	12	319	11	<b>8</b>	<b>8</b>
Total	3,059	401	7,632	114	1984	701	9,558	622

Notices to Abate Nuisances, etc.

Months.	Notices to Abate Nuisances.	Approvals for City Engineer's Office.	Application of Drainage for Inspector of Buildings Office.	Permissions to Enter Sewers. Minor Privileges.
January February March April May June July August September October November December	69 79 135 68 100 40 124 50 68 57 78 85	6 15 7 8 11 8 14 10 7 14 5	68 57 77 87 98 86 73 69 53 46 26	93 104 141 190 187 203 160 193 176 97 72 44
Total	953	110	764	1,660

# Sanitary Sewers.

Permits issued, 1911 and 1912 14,291	
Permits issued, 1913 19,443	
Permits issued, 1914 20,742	
Permits issued to date	54,476
Connections, 1911 and 1912 10,039	
Connections, 1913 16,535	
Connections, 1914 17,623	
Connections to date	44,198
Under construction	10,278
Number of Plumbing Fixtures Connected to City Sanitary Se	wers.
Water closets	48,258
Wash bowls	21,146
Bath tubs	22,539
Sinks	45,353
Wash trays	2,523
Urinals	<b>9</b> 59
Slop hoppers	517
Miscellaneous	1,544
Total	142,839
Abandoned.	
Drop privies	19,726
Wells	7,165
Old sewer connections	5,967
Total	32,859

## Non-Compliance With Notices Served, etc.

•					
Complaint.	"Summons to Show Cause" for Non-compliance With Notices Served.	Warrants.	Dismissed.	Fines and Costs.	
City sanitary sewers	7I 22	6	10 I	5 I	(1) \$20 00
	93	17	II	6 (1) \$5 00 (4) 10 00 (1) 50 00 (4) *	5 00 40 00 50 00 6 80
				(10)	\$121 80

\*Costs only.

Respectfully submitted,

CHARLES I. PUTTS, JR.,

Inspector of Plumbing.

## Report of Registrar's Clerk.

BALTIMORE, December 31, 1914.

NATHAN R. GORTER, M. D., Commissioner of Health.

#### DEAR SIR:

I respectfully submit my annual report of all transcripts issued from January 1, 1914, to date, with statement of purposes for which they were required and the amount received and paid the City Comptroller each month.

Transcripts Issued.	1913.	1914.
Births. Deaths.	1,408 2,028	1,087 2,069
Total	3,436	3,156
Amounts.		
January. February.	\$145 50 142 50	\$123 00 111 00
MarchApril	131 60 105 00 101 50	118 50 102 00 100 00
June. July. August	107 50 88 50 99 50	96 94 113 00 78 00
SeptemberOctober	111 00 97 50	77 50 84 50
November	88 60 103 00	89 00 78 00
Total	\$1,323 70	\$1,171 44

Purposes.	1913.	1914.
Burials	4 1,188	8 866
Foreign Information	93	60
InsuranceLegal	1,587	9 1,664
Pensions	206	33 <b>3</b> 145
RecordsSchools	28 42	33 37
Total	3,436	3,155

Months.	Amounts Received.	Paid Death Transcripts.	Paid Birth Transcripts.	Free Birth Transcripts.
January February March April May June July August September October November December	\$123 00 111 00 118 50 102 00 100 00 96 94 113 50 78 00 77 50 84 50 89 00 78 00	226 200 212 182 183 166 203 128 128 152 162 140	20 22 25 22 17 27 24 28 29 17 16	47 64 69 93 85 198 67 50 52 60 33
Total	\$1,171 94	2,080	263	834

Total number of applications for transcripts were 4,523, and of which there were no record of 1,367.

Respectfully submitted,

George C. Wedderburn,

Registrar's Clerk.

### Report of Complaint Clerk.

BALTIMORE, December 31, 1914.

NATHAN R. GORTER, M. D., Commissioner of Health.

#### DEAR SIR:

I respectfully submit herewith report of work done through the office of Complaint Clerk for the year ending December 31, 1914.

You will note there are two tables, one showing the total number of personal complaints, the other giving a list of those abated with the assistance of the Plumbing Division.

In addition to these two tables, there were received from the various police districts 4,952 reports containing 28,248 complaints of nuisances, from which, and including the personal complaints, there were sent out from this office by the health wardens 34,365 notices.

To classify all complaints received in this office under their respective headings would require a space entirely too large to have same arranged properly in book form. I have, therefore, given those of most frequent occurrence, while others, which are made up of various and trifling causes are placed under the heading of "Unsanitary Conditions."

The connections of numerous dwellings in the city with the new sanitary sewers during the year 1914 should naturally improve conditions considerably as far as overflowing privies, defective drainage, water in cellars and yards, etc., are concerned, but at the same time it can be seen that the new system will, for the time at least, require considerable attention of this Department in the abatement of nuisances, such as choked sewers and other conditions in consequence of same.

Respectfully submitted,

B. F. BOYDEN,

Complaint Clerk.

Total.	108	21.0	279	<u></u>	192	<b>2</b> 20 20 20 20 20 20 20 20 20 20 20 20 20	223	185	28	239	233	, % 3, %	176	146	98	장	135	155	172	173	000	4,903
Inspection of Workshops.	:		m	0 :	:			:	:	:	:		-	:	:	:	:	:	:	:	;	15
Unsanitary Conditions.	8 8	3,2	82	8 4	89	42	32	27	33	<b>4</b>	8 4	2 %	31	23	8	4	ଛ	37	8	32	į	2116
Insufficient Toilets.	81	<u>س</u>	13	S :	:				:	:	:		-	:	:	:	:	N	:	:	q	8
Choked Sewers.	ω,	4 I	∞ ;	29	6	12	`II	4	9	7	8:	4 0	4	15	3	4	7	91	01	н	3	<u>8</u>
Inspection of Cellars.	ω,	4 1	910	טי יט	7	O 1	90	4	:	(1	4	∞	71	(1	~	9	m	'n	4	4	9	8
Inspection of Toilets.	ο:	27	9 9	3 S	17	242	7	10	7	23	35	181	22	17	II'	9	11	15	'n	^	-	424
Defective Wells.		-	:	w 4	:	4 v	0 01	7	9	7	<b>с</b>	4 v	6	က	7	01	9	:	н	01	0,4	8
Inspection of Yards.	4 5	22	91	2,8	17	12	8	8,	9	8	62 8	y CI	01	13	00	∞	~	<b>%</b> 1	Π	12		5 5
Defective Drainage.	45	5 Q	29	0 2	14	2 2	œ		8	8	15	171	9	4	9	53	14	9	91	41		35/
Water in Cellars.	23	5,6	72.	₹4	4	22 82	8	23	61	22	0 S	, CI	11	∞	15	8	91	8	<u>∞</u>	32	70,7	) (2)
Alleys Requir- ing Attention.	21	9 2	40	8 4	25	3,8	8	8	33	40	80	84	81	15	22,	ဓ္က	15	12	27	23	3	427
Overflowing Privies.	15	3.15	8	\$∞	23	 ₹	8	6,	8,	5	200	3,8	8	9	8	4	33	77	7	8	780	20,1
Wards.	First	Third	Fourth	Sixth	Seventh	Eighth Ninth	Fenth	Eleventh	Twelfth	Thirteenth	Fourteenth	Sixteenth	Seventeenth	Eighteenth	Nineteenth	I wentieth	I wenty-first	Iwenty-second	I wenty-third	Fwenty-fourth	£.	1 Otal

Referred to Plumbing Division.

•													
Wards.	Overflowing Privies.	Alleys Requiring Attention.	Water in Cellars.	Defective Drainage.	Water in Yards.	Defective Wells.	Inspection of Toilets.	Inspection of Cellars.	Choked Sewers.	Water in Manholes.	S'w'ge Backing Into Cellars.	Unsanitary Conditions.	Total.
First	2 1 1 2 3 3 2 4 4 2 2 3 3 1 2 2 1	I	122 8 30 422 21 12 27 26 15 26 17 19 19 16 7 6 4 28 6 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	2 1 2 3 1 1 2 1 1 1 1	2 3 2  2		3		4 2 122 160 133 166 6 6 8 7 188 160 8 8 3 8 8			3 1 3 1	19 15 47 64 38 47 39 44 38 52 28 31 27 32 51 20 7 7 2 34 6 16
Total	35	3	429	ij	10	<i></i>	7		206			10	, 719

# Report of Burial Permit Clerks.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

#### DEAR SIR:

We hereby respectfully submit the report of the work done by the burial permit clerks for the year ending December 31, 1914.

The following table exhibits a summary of the various kinds of permits issued during the year:

Months.	Burial Permits, City.	Burial Permits, Transit.	Burial Permits, Still Births.	Burial Permits, Shipping.	Burial Permits, Shipping Dup't.	Burial Permits, Disinter.	Removal Permits.	Total.
January February March April May June July August September October November December	989 943 1,129 937 865 757 897 845 771 736 791 835	153 137 133 132 117 113 130 138 109 109	89 71 97 95 95 85 86 57 77 80 79	122 110 137 120 123 111 119 102 96 98 107 131	122 110 137 120 123 111 119 102 96 98 107 131	10 16 12 64 52 8 . 2 1 48 44 69		1,858 2,175 1,909 1,807 1,568 1,851 1,723 1,687 1,580 1,690
Total	10,495	1,577	1,022	1,376	1,376	335	5,610	21,791

During the year there were received from cemeteries and transportation companies 14,805 burial, disinterment and shipping permits, which have been placed in numerical order, and the same have been filed for reference.

Respectfully submitted,

HARRY C. ANDREWS,
ROBERT R. KRAUTER,
Burial Permit Clerks.

## Report of Nuisance Clerk.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

## DEAR SIR:

The following is the report of the work done in the Nuisance Department for the year ending December 31, 1914:

Months.	Permits Issued.	No. of Loads to Winan's Dump.
January	741	758
February	525	541
March	1,255	1,294
April	1,854	1,890
May	1,454	1,463
June	1,216	1,247
July	933	941
August	752	765
September	741	<i>7</i> 68
October	771	782
November	524	548
December	530	549
Total	11,296,	11,546

Respectfully submitted,

Edward H. Thompson,

Nuisance Clerk.

## Report of Index Clerk.

BALTIMORE, January 1, 1915.

NATHAN R. GORTER, M. D., Commissioner of Health.

### DEAR SIR:

I beg to submit the following report of work performed by the Index Clerk during the year ending December 31, 1914:

Number of deaths indexed	. 10,551
Number of births indexed	12,637
Number of still births indexed	1,026

I have also kept a record of all birth certificates, and have posted same on cards, showing what certificates have been received and the name of the doctor or midwife who have registered same.

Respectfully submitted,

CHARLES M. SINCLAIR,

Index Clerk.

## Report of Clerk to Bureau of Vital Statistics.

BALTIMORE, December 31, 1914.

NATHAN R. GORTER, M. D., Commissioner of Health.

#### DEAR SIR:

I hereby respectfully submit for your consideration the report of the Division of which I have supervision.

All cases of infectious diseases reported have been recorded and placed on file.

Report cards of health wardens of such cases have also been placed on file for reference. Cards of physicians reporting contagious diseases to this Department have been filed in their respective wards.

Below will be found the number of cases reported from January 1, 1914, to December 31, 1914.

	1914.	1913.
Smallpox	325	50
Diphtheria	1,233	1,309
Scarlet fever	802	1,138
Typhoid fever	75 <b>7</b>	1,163
Measles	466	5,724
Mumps	602	161
Whooping cough	522	290
Varicella	788	595
Tuberculosis pulmonalis	1,410	1,541
Poliomyelitis	I	2
Cerebro spinal fever	. 3	• • • • •

The record of midwives has been kept and transcripts sent to the State Board of Health; also a record of licenses for the purpose of boarding babies have been kept, after being reported on by the health wardens in wards where the applicant resided.

Respectfully submitted,

CHARLES W. BUSICK,

Clerk to the Bureau of Vital Statistics.

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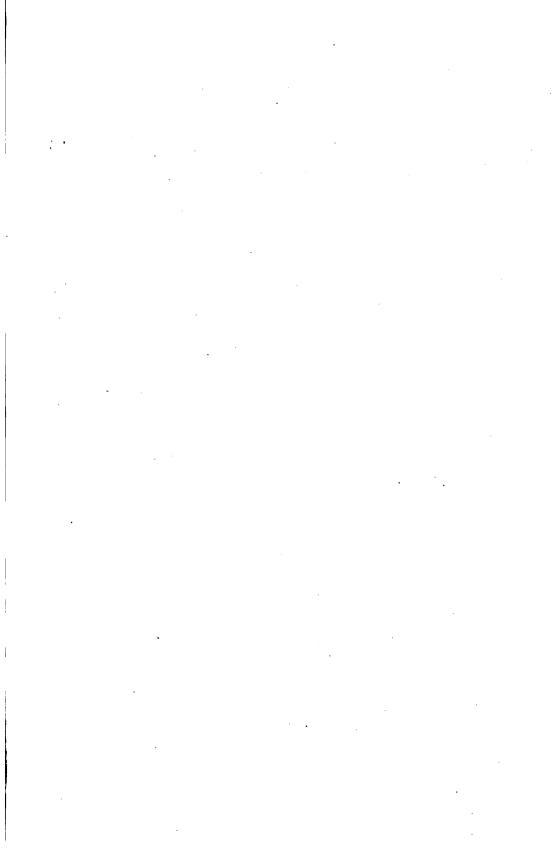
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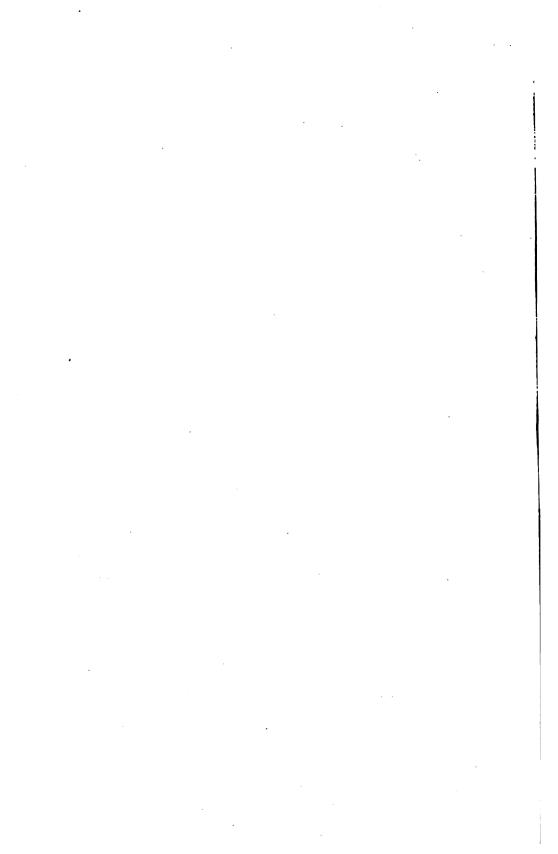
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